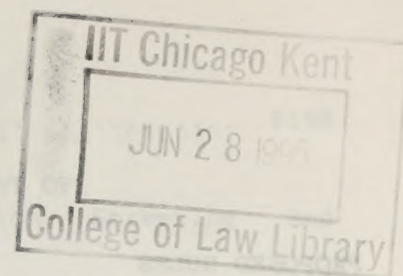
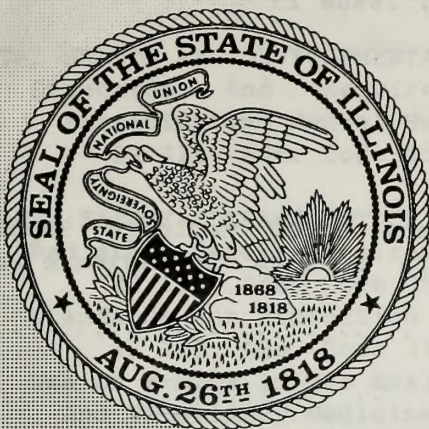


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**1995**

# ***Illinois Register***

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## **Rules of Governmental Agencies**

Volume 19, Issue 25— June 23, 1995

Pages 8032 - 8478

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Index Department  
Administrative Code Div.  
111 East Monroe Street  
Springfield, IL 62756  
(217) 782-7017

published by  
**George H. Ryan**  
Secretary of State



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**Editor's Note:** The Cumulative Index and Sections Affected Index will be printed on a quarterly basis. The printing schedule for the quarterly and annual indexes are as follows:

April 14, 1995 - Issue 15: Through	March 31, 1995
July 14, 1995 - Issue 28: Through	June 30, 1995
October 15, 1995 - Issue 37: Through	September 30, 1995
January 12, 1996 - Issue 2: Through	December 31, 1995 (Annual)



## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

- 1) Heading of the Part: Transitional Requirements for the Conversion of Medicare Supplement Insurance Benefits and Premiums to Conform to Medicare Program Revisions

- 2) Code Citation: 50 Ill. Adm. Code 2011

- 3) Section Numbers: Proposed Action:

2011.10	Repeated
2011.20	Repeated
2011.30	Repeated
2011.40	Repeated
2011.45	Repeated
2011.50	Repeated
2011.60	Repeated
2011.70	Repeated
2011.Appendix A	Repeated
2011.Appendix B	Repeated
2011.Appendix C	Repeated

- 4) Statutory Authority: [215 ILCS 5/363]

- 5) A Complete Description of the Subjects and Issues Involved: Part 2011 was initially promulgated to ease the transition into the medicare requirements under Part 2008. Part 2008 is now in place, therefore Part 2011 is no longer needed.

- 6) Will this proposed Repealer replace emergency rule currently in effect?  
No.

- 7) Does this Rulemaking contain an automatic repeal date? No.

- 8) Does this proposed Repealer contain incorporations by reference? No.

- 9) Are there any other proposed amendments pending on this Part? No.

- 10) Statement of Statewide Policy Objectives: Not applicable.

- 11) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking: Persons who wish to comment on this proposed rulemaking may submit written comments no later than 45 days after the publication of this Notice to:

Denise Fuchs	Mary Meyer
Rules Unit Supervisor	Paralegal
Department of Insurance	Department of Insurance
320 West Washington	(or) 320 West Washington
Springfield, Illinois 62767	Springfield, Illinois 62767

## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

217/785-8560 217/785-8220

- 12) Initial Regulatory Flexibility Analysis: This Repealer will not affect small businesses.

- 13) State reason(s) for this rulemaking if it was not included in either of the two (2) most recent regulatory agendas: This Part is being repealed because it is obsolete and no longer needed.

The full text of the Proposed Repealer begins on the next page:



## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

## TITLE 50: INSURANCE

## CHAPTER I: DEPARTMENT OF INSURANCE

## SUBCHAPTER 2: ACCIDENT AND HEALTH INSURANCE

## PART 2011

TRANSITIONAL REQUIREMENTS FOR THE CONVERSION  
OF MEDICARE SUPPLEMENT INSURANCE BENEFITS AND  
PREMIUMS TO CONFORM TO MEDICARE PROGRAM REVISIONS (REPEALED)

Section	Purpose
2011.10	Purpose
2011.20	Applicability and Scope
2011.30	Definitions
2011.40	Benefit Conversion Requirements
2011.45	Offer of Reinstitution of Coverage
2011.50	Requirements for New Policies and Certificates
2011.60	Filing Requirements for Advertising
2011.70	Buyer's Guide
APPENDIX A	Notice of Medicare Changes-1989
APPENDIX B	Notice of Medicare Changes-1990 (Repealed)
APPENDIX C	Notice of Medicare Changes-1991 (Repealed)

AUTHORITY: Implementing and authorized by Sections 363 and 363a of the Illinois Insurance Code (Ill. Rev. Stat. 1989, ch. 73, pars. 975 and 975a).

SOURCE: Adopted at 13 Ill. Reg. 3804, effective March 13, 1989; amended at 14 Ill. Reg. 20408, effective December 7, 1990; repealed at 19 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_.

## Section 2011.10 Purpose

The purpose of this Part is to assure the orderly implementation and conversion of medicare supplement insurance benefits and premiums due to changes in the federal Medicare program; to provide for the reasonable standardization of the coverage, terms and benefits of medicare supplement policies or contracts; to facilitate public understanding of such policies or contracts; to eliminate provisions contained in such policies or contracts which may be misleading or confusing in connection with the purchase of such policies or contracts; to eliminate policy or contract provisions which may duplicate Medicare benefits; to provide for adjustment of required minimum benefits for Medicare supplement policies; to provide notice to former policyholders to offer to reinstitute coverage; to provide full disclosure of policy or contract benefits and benefit changes; and to provide for refunds of premiums associated with benefits duplicating Medicare program benefits.

(Source: Amended at 14 Ill. Reg. 20408, effective December 7, 1990)

## Section 2011.20 Applicability and Scope

## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

This Part shall take precedence over other rules and requirements relating to medicare supplement policies (50 Ill. Adm. Code 2008) only to the extent necessary to assure that benefits are not duplicated and to adjust minimum required benefits to changes in Medicare benefits, that applicants receive adequate notice and disclosure of changes in medicare supplement policies and contracts, that appropriate premium adjustments are made in a timely manner, and that premiums are reasonable in relation to benefits. Except as otherwise provided, this Part shall apply to:

- All medicare supplement policies delivered, or issued for delivery, or which are otherwise subject to the jurisdiction of this state on or after the effective date hereof, and
- All certificates issued under group medicare supplement policies as provided in subsection (a) above.

(Source: Amended at 14 Ill. Reg. 20408, effective December 7, 1990)

## Section 2011.30 Definitions

For purposes of this Part:

"Applicant" means: in the case of an individual medicare supplement policy or subscriber contract, the person who seeks to contract for insurance benefits, and in the case of a group medicare policy or subscriber contract, the proposed certificate holder (Section 363(2)(a) of the Code).

"Certificate" means any certificate issued under a group medicare supplement policy (Section 363(2)(b) of the Code).

"Code" means the Illinois Insurance Code (Ill. Rev. Stat. 1987, ch. 73, pars. 613 et seq.).

"Department" means the Illinois Department of Insurance.

"Director" means the Director of the Illinois Department of Insurance.

"Insurer" means an insurance company, fraternal benefit society, nonprofit health, hospital, or medical service corporation, prepaid health plan or any similar organization which has delivered or issued for delivery in this State a medicare supplement policy.

"Medicare" means the "Health Insurance for the Aged Act", Title XVII of the Social Security Amendments of 1965, as now or later amended, including the "Medicare Catastrophic Coverage Act of 1988" (Section 363(2)(d) of the Code).

"Medicare Supplement Policy" means a group or individual policy of Accident and Health insurance or subscriber contract delivered or



## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

issued for delivery in this State by an insurer, fraternal benefit society, nonprofit health, hospital or medical service corporation, prepaid health plan, or any similar organization which is advertised, marketed or designed primarily as a supplement to reimbursements under Medicare for the hospital, medical or surgical expenses of persons eligible for Medicare by reason of age (Section 363(2)(c) of the Code).

## Section 2011.40 Benefit Conversion Requirements

- a) Effective January 1, 1990, no Medicare supplement insurance policy or certificate in force in this State shall contain benefits which duplicate benefits provided by Medicare.
- b) Benefits eliminated by operation of the Medicare Catastrophic Coverage Act of 1988 (Pub. L. 100-360, December 13, 1988) transition provisions shall be restored.
- c) For Medicare supplement policies subject to the minimum standards adopted by the States pursuant to Medicare Catastrophic Coverage Act of 1988, the minimum benefits shall be:
  - 1) Coverage of Part A Medicare eligible expenses (see 42 U.S.C. 1395e) for hospitalization to the extent not covered by Medicare from the 61st day through the 90th day in any Medicare benefit period;
  - 2) Coverage for either all or none of the Medicare Part A inpatient hospital deductible amount.
  - 3) Coverage of Part A Medicare eligible expenses incurred as daily hospital charges during the use of Medicare's lifetime hospital inpatient reserve days;
  - 4) Upon exhaustion of all Medicare hospital inpatient coverage including the lifetime reserve days, coverage of ninety percent of all Medicare Part A eligible expenses for hospitalization not covered by Medicare subject to a lifetime maximum benefit of an additional 365 days;
  - 5) Coverage under Medicare Part A (see 42 CFR 409.87(b), 1989, no subsequent dates or editions) for the reasonable cost of the first three (3) pints of blood (or equivalent quantities of packed red blood cells, as defined under federal regulations (see 42 CFR 409.87(a), 1989, no subsequent dates or editions,)) unless replaced in accordance with federal regulations or already paid for under Part B.
  - 6) Coverage for the coinsurance amount of Medicare eligible expenses under Part B regardless of hospital confinement, subject to a maximum calendar year out-of-pocket amount equal to the Medicare Part B deductible (\$75).
  - 7) Coverage under Medicare Part B for the reasonable cost of the first three (3) pints of blood or equivalent quantities of packed red blood cells, unless replaced in accordance with federal regulations (see 42 CFR 409.87(b), 1989, no subsequent dates or

## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

editions) or already paid for under Part A, subject to the Medicare deductible amounts.

## d) General Requirements

## 1) Notification

- A) No later than January 31, 1990, every insurer providing Medicare supplement insurance or benefits to a resident of this State shall notify its policyholders, contract holders and certificateholders of modifications it has made to Medicare supplement insurance policies or contracts. Such notice shall be in the format shown in 2011. Appendix A.
  - B) Such notice shall include a description of revisions to the Medicare program and a description of each modification to the coverage under the Medicare supplement insurance policy.
  - C) The notice shall inform each covered person as to when any premium adjustment due to changes in Medicare benefits will be made.
  - D) Such notice shall not contain or be accompanied by any solicitation.
- 2) No modifications to an existing Medicare supplement contract or policy shall be made at the time of or in connection with the notice requirements of this regulation except to the extent necessary to eliminate duplication of Medicare benefits and any modifications necessary under the policy to provide for automatic changes in the annual Part A Medicare deductible amounts.
  - 3) As soon as practicable, but no longer than forty-five (45) days after the effective date of the Medicare benefit changes and prior to use, every insurer providing Medicare supplement insurance or contracts in this State shall file with the Department, in accordance with the applicable filing procedures of this State (see 50 Ill. Adm. Code 916):
    - A) Appropriate premium adjustments necessary to produce loss ratios as originally anticipated for the applicable policies or contracts. Such supporting documents as necessary to justify the adjustment shall accompany the filing. Such supporting documents shall include incurred claims and earned premium data as set out in Section 363a of the Illinois Insurance Code (Ill. Rev. Stat. 1989, ch. 73, par. 975a) and 50 Ill. Adm. Code 2008.80, and any other information deemed relevant by the insurer.
- Agency Note: This subsection is not intended to require a return of premium in cases in which a higher loss ratio is actually achieved than was originally anticipated. It is only intended that premium adjustments shall be made based on an anticipated loss ratio which falls below that which was originally filed. Adjustments should be sufficient to generate an anticipated loss ratio as originally filed.
- B) Any riders, endorsements or policy forms needed to accomplish the Medicare supplement insurance modifications

## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

necessary to eliminate benefit duplications with Medicare and to provide the benefits required by Section 208.40. Any such riders, endorsements or policy forms shall provide a clear description of the Medicare supplemental benefits provided by the policy or contract.

4) Upon satisfying the filing and approval requirements of this state, every insurer providing Medicare supplement insurance in this State, shall provide each covered person with any rider, endorsement or policy form necessary to make the adjustments outlined in Section 201.40(d).

5) Any premium adjustments shall produce an expected loss ratio under such policy or contract as will conform with minimum loss ratio standards for Medicare supplement policies and shall result in an expected loss ratio at least as great as that originally anticipated by the insurer for such Medicare supplement insurance policies (see 50 Ill. Adm. Code 208.80) or contracts. Premium adjustments may be calculated for the period commencing with Medicare benefit changes.

(Source Amended at 14 Ill. Reg. 20408, effective December 7, 1990)

## Section 201.45 Offer of Reinstitution of Coverage

a) Except as provided in subsection (b) below, in the case of an individual who had in effect, as of December 31, 1988, a Medicare supplemental policy with an insurer, as a policyholder or, in the case of a group policy, as a certificate holder, and the individual terminated coverage under such policy before December 13, 1989, the insurer shall:

- 1) Provide written notice no earlier than December 15, 1989, and no later than February 1, 1990, to the policyholder or certificate holder (at the most recent available address) of the offer described below, and
- 2) Offer the individual, during a period of at least 60 days beginning not later than 30 days from the effective date of this Part, reinstitution of coverage (with coverage effective as of the effective date of this Part), under the terms which:
  - A) Does not provide for any waiting period with respect to treatment of pre-existing conditions;
  - B) Provides for coverage which is substantially equivalent to coverage in effect before the date of such termination; and
  - C) Provides for classification of premiums on which terms are at least as favorable to the policyholder or certificate holder as the premium classification terms that would have applied to the policyholder or certificate holder had the coverage never terminated.
- b) An insurer is not required to make the offer under subsection (2) above in the case of an individual who is a policyholder or

## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

certificate holder in another Medicare supplemental policy as of the effective date of this Part, if the individual is not subject to a waiting period with respect to treatment of a pre-existing condition under such other policy.

(Source: Added at 14 Ill. Reg. 20408, effective December 7, 1990)

## Section 201.50 Requirements for New Policies and Certificates

a) Effective January 1, 1989, no Medicare supplement insurance policy or certificate shall be issued or issued for delivery in this state which provides benefits which duplicate benefits provided by Medicare. No such policy or certificate shall provide less benefits than those required under existing Medicare Supplement Minimum Standards contained in Section 363 of the Illinois Insurance Code and 50 Ill. Adm. Code 208 except where duplication of Medicare benefits would result and except as required by these transition provisions.

b) General Requirements

- 1) Within ninety (90) days of the effective date of this Part, every insurer shall file new Medicare supplement insurance policies which eliminate any duplication of Medicare supplement benefits with benefits provided by Medicare, which adjust minimum required benefits to changes in Medicare benefits and which provide a clear description of the policy or contract benefit.
- 2) The filing required under subsection (1) above shall provide for loss ratios which are in compliance with all minimum standards.
- 3) Every applicant for a Medicare supplement insurance policy or certificate shall be provided with an outline of coverage which simplifies and accurately describes benefits provided by Medicare and policy benefits along with benefit limitations as set out in 50 Ill. Adm. Code 208. Appendix B.

(Source: Amended at 14 Ill. Reg. 20408, effective December 7, 1990)

## Section 201.60 Filing Requirements for Advertising

Every insurer shall provide a copy of any Medicare supplement advertisement intended for use in this State whether through written, radio or television medium to the Director of Insurance of this State for his review. Such advertisement shall comply with all applicable laws of this State.

## Section 201.70 Buyer's Guide

No insurer shall make use of or otherwise disseminate any Buyer's Guide or informational brochure which does not accurately outline current Medicare benefits and which has not been approved by the Director. In evaluating any Buyer's Guide or informational brochure, the Department will compare such submissions with the "Guide to Health Insurance for People with Medicare 1989"



## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

(no later amendments or editions), developed jointly by the National Association of Insurance Commissioners and the Health Care Financing Administration of the U.S. Department of Health and Human Services.

## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

## Section 2011.APPENDIX A Notice of Medicare Changes-1989

(Company Name)

## NOTICE OF CHANGES IN MEDICARE AND YOUR MEDICARE SUPPLEMENT COVERAGE - 1990

The following outline briefly describes the modifications in Medicare and in your Medicare supplement coverage. Please read this carefully!

(A brief description of the revisions to Medicare Parts A & B with a parallel description of supplemental benefits with subsequent changes, including dollar amounts, provided by the Medicare supplement coverage in substantially the following format).

Services	Medicare Benefits		Your Medicare Supplement Coverage	
	In 1989 Medicare Pays per Calendar Year	Effective January 1, 1990 Medicare Will Pay	In 1989 Your Coverage Pays	Effective January 1, 1990 Your Coverage Will Pay

MEDICARE PART A  
SERVICES AND  
SUPPLIES

Inpatient Hospital Services	Unlimited number of hospital days after \$560	All but \$592 for first 60 days/ benefit period		
Semi-Private Room & Board		All but \$148 a day for 61st-90th days benefit period		
Miscellaneous Hospital Services & Supplies, such As Drugs, X-Rays, Lab Test & Operating Room		All but \$236 a day for 91st-150th days (if individual chooses to use 60 non- renewable lifetime reserve days)		
BLOOD	Pays all costs except payment	Pays all costs except		

## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

In 1989 Medicare Pays Per Calendar Year	Effective January 1, 1990 Medicare Will Pay	In 1989 Your Coverage Pays	Effective January 1, 1990 Your Coverage Will Pay
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of deductible (equal to costs for first 3 pints) each calendar year. Part A blood reduced to the extent paid under Part B

SKILLED  
NURSING  
FACILITY CARE

There is no prior confinement requirement for this benefit

100% of costs for first 20 days (after a 3 day prior hospital confinement/benefit period

First 8 days-All but \$25.50 a day

All but \$74.00 a day for 21st-100th days/benefit period

9th through 150th day-100% of costs

Beyond 100 days-Nothing/benefit period

Beyond 150 days-Nothing

MEDICARE PART  
B SERVICES  
AND SUPPLIES

80% of allowable charges (after \$75 deductible)

80% of allowable charges (after 75% deductible/calendar year)

## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

In 1989 Medicare Pays Per Calendar Year	Effective January 1, 1990 Medicare Will Pay	In 1989 Your Coverage Pays	Effective January 1, 1990 Your Coverage Will Pay
--	---	----------------------------------	--

PRESCRIPTION  
DRUGS

Inpatient prescription drugs. 80% of allowable charges for immuno-suppressive drugs during the first year following a covered transplant (after \$75 deductible/calendar year)

BLOOD

80% of all costs except nonreplacement fees (blood deductible) for first 3 pints in each benefit period (after \$75 deductible/calendar year)

80% of costs except nonreplacement fees (blood deductible) for first 3 pints (after \$75 deductible/calendar year)

(Any other policy benefits not mentioned in this chart should be added to The chart in the order prescribed by the outline of coverage. If there are corresponding Medicare benefits, they should be shown.)

(Describe any coverage provisions changing due to Medicare modifications.)

(Include information about when premium adjustments that may be necessary due to changes in Medicare benefits will be effective.)

THIS CHART SUMMARIZING THE CHANGES IN YOUR MEDICARE BENEFITS AND IN YOUR MEDICARE SUPPLEMENT PROVIDED BY (COMPANY) ONLY BRIEFLY DESCRIBES SUCH BENEFITS. FOR INFORMATION ON YOUR MEDICARE BENEFITS CONTACT YOUR SOCIAL SECURITY OFFICE OR THE HEALTH CARE FINANCING ADMINISTRATION FOR INFORMATION ON YOUR MEDICARE SUPPLEMENT (POLICY) CONTRACT: COMPANY AND FOR AN INDIVIDUAL POLICY-NAME OF



## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

## AGENT) (ADDRESS/PHONE NUMBER)

(Source: Amended at 14 Ill. Reg. 20408, effective December 7, 1990)

## DEPARTMENT OF INSURANCE

## NOTICE OF PROPOSED REPEALER

## Section 2011.APPENDIX B NOTICE ON MEDICARE CHANGES-1990 (Repealed)

(Source: Repealed at 14 Ill. Reg. 20408, effective December 7, 1990)

DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED REPEALER

Section 2011.APPENDIX C NOTICE OF MEDICARE CHANGES-1991 (Repealed)

(Source: Repealed at 14 Ill. Reg. 20408, effective December 7, 1990)

DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED REPEALER

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## ILLINOIS DEPARTMENT OF MINES AND MINERALS

## NOTICE OF PROPOSED RULES

1) Heading of the Part: Oil and Gas Wells on Public Lands Act2) Code Citation: 62 Ill. Adm. Code 2503) Section Number: Proposed Action:

250.10	New
250.20	New
250.30	New
250.40	New
250.50	New
250.60	New
250.70	New
250.80	New
250.90	New

4) Statutory Authority: Implementing and authorized by Section 16 of the Oil and Gas Wells on Public Lands Act [5 ILCS 615/16].

5) A complete description of the subjects and issues involved: Proposed new Part 250 implements the Oil and Gas Wells on Public Lands Act [5 ILCS 615] by establishing a comprehensive scheme regulating the exploration and leasing of oil and gas reserves underlying State owned land. Specifically, these new rules establish administrative procedures for: (a) designating State owned land as "unknown" or "proven" territory (for purposes of oil and gas exploration/production); (b) issuing permits to explore unknown territory and (c) leasing tracts of land found to be proven territory. The administrative process created in new Part 250 ensures that all oil and gas exploration/production operations on State owned land occurs in an environmentally sound manner. Although these rules are being proposed by the Illinois Department of Mines and Minerals, as required by Section 16 of the Oil and Gas Wells on Public Lands Act [5 ILCS 615], this new regulatory program will be administered by the Office of Mines and Minerals within the Department of Natural Resources created pursuant to Executive Order No. 2 (1995).

6) Will this proposed rule replace an emergency rule currently in effect? No7) Does this rulemaking contain an automatic repeal date? No8) Do these proposed rules contain incorporations by reference? No9) Are there any other amendments pending on this Part? No10) Statement of Statewide Policy Objectives: The proposed rules will have no impact on local units of government.11) Time, Place, and Manner in which interested persons may comment on this

## ILLINOIS DEPARTMENT OF MINES AND MINERALS

## NOTICE OF PROPOSED RULES

proposed rulemaking: Written comments may be submitted within 45 days of the publication of this notice to:

Lawrence E. Bengal, Supervisor  
Oil and Gas Division  
Office of Mines and Minerals  
Illinois Department of Natural Resources  
300 West Jefferson, Suite 300  
P.O. Box 10140  
Springfield, IL 62791-0140  
(217) 782-7756

Commenters must provide a name and address. Comments must be directed to a specific subsection and must be made on a separate sheet of 8 1/2 x 11 inch paper.

Comments may include data, views, arguments or any documents relevant to the proposals noted above in the Description of Subjects and Issues involved. All comments are due at the above address no later than 5:00 p.m. on August 31, 1995. Comments received thereafter will not be considered in this rulemaking.

The Office of Mines and Minerals will hold a public hearing on the proposed rulemaking on July 21, 1995, at 10:00 a.m., in the Illinois Department of Natural Resources, Office of Mines and Minerals located at 300 West Jefferson, Suite 300, Springfield, Illinois and on July 31, 1995, at 11:00 a.m., at the Ramada Hotel located in Mt. Vernon, Illinois. Representatives of small businesses are encouraged to comment about the impact of the proposed rulemaking at this public hearing.

12) Initial Regulatory Flexibility Analysis:

A) Types of small businesses affected: All oil and gas well operators employing less than fifty people and having less than four million dollars in annual sales.

B) Reporting, bookkeeping or other procedures required for compliance:

Section 250.20 requires that persons seeking to designate a tract of State owned land as proven or unknown territory must file a written designation request following a set regulatory format.

Sections 250.40 outlines the format that must be followed for oil and gas leases granted to persons holding a permit to explore unknown territory.

Section 250.60 outlines the bid submission process for persons wishing to lease proven territory as well as the format that must be followed

## ILLINOIS DEPARTMENT OF MINES AND MINERALS

## NOTICE OF PROPOSED RULES

for oil and gas leases granted to the highest responsible bidder.

Section 250.70 requires that a lessee, prior to drilling any well on State owned land, must file, depending on the depth of the well, either a \$1,500.00 or \$3,000.00 bond in order to ensure that the well and related site are restored in conformance with the requirements of the Illinois Oil and Gas Act [225 ILCS 725].

Section 250.90 outlines the format of the written request that must be made by a party wishing to receive notice of the designation of a tract of land as unknown or proven territory.

C) Types of professional skills necessary for compliance: Education or work experience relating to oil and gas conveyancing and petroleum geology.

13) State reason(s) for this rulemaking if it was not included in either of the two (2) most recent regulatory agendas: This rulemaking was summarized in a regulatory agenda submitted to the Administrative Code Division for publication in the Illinois Register on June 23, 1995.

The full text of the Proposed Rules begins on the next page.

## ILLINOIS DEPARTMENT OF MINES AND MINERALS

## NOTICE OF PROPOSED RULES

TITLE 62: MINING

## CHAPTER I: DEPARTMENT OF MINES AND MINERALS

## PART 250

## OIL AND GAS WELLS ON PUBLIC LANDS ACT

## Section

250.10 Definitions

250.20 Designation of State Lands

250.30 Permit to Explore Unknown Territory

250.40 Granting a Lease to a Person Holding a Permit to Explore

250.50 Designation of Proven Territory

250.60 Leasing Proven Territory

250.70 Bonding Requirements

250.80 Public Notice

250.90 Public Lands Lease Notice List

**AUTHORITY:** Implemented and authorized by Section 16 of the Oil and Gas Wells on Public Lands Act [5 ILCS 615/16].

**SOURCE:** Adopted at 19 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_.

## Section 250.10 Definitions

"Act"--means the Oil and Gas Wells on Public Lands Act [5 ILCS 615].

"Office"--means the Office of Mines and Minerals in the Illinois Department of Natural Resources.

"Permittee"--means a person or entity who applies for and is issued a permit by the Office to explore unproven territory.

"Proven territory"--means territory so situated with reference to known producing wells as to establish the general opinion that, because of its relation to them, petroleum is contained in it. [5 ILCS 615/1]

"Unknown territory"--means territory determined, in accordance with Section 250.20 of this Part, to lack proven petroleum reserves.

## Section 250.20 Designation of State Lands

- a) Any person may request the Office to designate a tract of State owned land as proven or unknown territory.
- b) The request must be submitted to the Office in writing and include:
  - 1) a legal description of the land;
  - 2) a brief synopsis of the oil and gas potential;



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- 3) documentation evidencing State ownership of the mineral rights; and
- 4) general overview of the anticipated development or exploration plans.
- c) If the Office determines, based upon the information included in the designation request, that a tract of State owned land should be designated as unknown territory due to a lack of proven petroleum reserves, the entity submitting such request may apply for an exploration permit in accordance with Section 250.30 of this Part.
- d) If the Office determines, based upon the information included in the designation request, that a tract of State owned land should be designated as proven territory, in accordance with Section 250.50(a) and (b) of this Part, the designation request shall be processed in accordance with Section 250.50(c) of this Part.
- e) The Office will respond in writing to the inquiring party as to the final designation of the State land within thirty (30) days after receipt of the request.

## Section 250.30 Permit to Explore Unknown Territory

- a) Any person (applicant) may request a permit to explore for oil or gas on State owned land designated as unknown territory in accordance with Section 250.20 of this Part. The request shall not be made for more than three sections of land or equivalent acreage (1920 acres) and shall not contain any land where the oil and gas rights are not wholly owned by the State of Illinois. The request shall:
  - 1) be in writing;
  - 2) describe the method of exploration contemplated;
  - 3) contain a legal description of the land for which a permit to explore is sought that includes proof satisfactory to the Office that the oil and gas rights underlying the described land are wholly owned by the State;
  - 4) articulate a general plan for future development in the event oil and/or gas is discovered; and
  - 5) include a signed agreement reached with the State agency owning the land to be explored, encompassing the scope of all aspects of the exploration operations contemplated by the permittee, including but not limited to:
    - A) the amount paid for damages to the surface of the land;
    - B) the method and timing of access to the site for exploration so as to minimize interference with State programs; and
    - C) the procedures for the mitigation of damage to the site during exploration activities and for the restoration of the site following exploration activities.
- b) If more than one applicant submits a request for a permit to explore a particular area of land, the Office shall solicit competitive sealed bids from such requesting persons, the bids to be opened at a date, time and location stated in the request for bids. The permit to

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- explore shall be awarded to the person submitting the highest cash bonus as part of the bid.
- c) The permit to explore shall be valid for one (1) year.
  - d) Permittee may surrender the permit at any time and shall be relieved of all liability except for physical damage to the land and any other site mitigation and restoration activities specified in the signed agreement with the State agency with jurisdiction over the land to be explored.

## Section 250.40 Granting a Lease to a Person Holding a Permit to Explore

- a) If the permittee has discharged all of the conditions required by the permit to explore to the satisfaction of the Office and the State agency owning the land to be explored, as evidenced by a release issued by said State agency, and has made an application to the Office for a lease not later than on the date of expiration of the permit to explore, the Office shall grant to the permittee a lease for the extraction of petroleum not to exceed one section of land or an equivalent amount of acreage (640 acres).
- b) The form of leases granted to persons holding a permit to explore shall be the same as the Standard Commercial Petroleum Lease generally in use in the territory in which the oil, gas or other petroleum deposits are located and shall incorporate the following basic lease terms and restrictions:
  - 1) The lease shall be for a primary term not to exceed ten (10) years and for as long thereafter as oil in commercial quality and commercial quantity is produced from the lands embraced in the lease.
  - 2) The State agency with jurisdiction over the land encompassed within the lease shall receive royalties at a rate of 12 1/2% of the market value of the petroleum produced and saved therefrom.
  - 3) The State agency with jurisdiction over the land encompassed within the lease shall receive an annual rental, payable in advance, of \$10.00 per acre, which rental shall be credited against future royalties.
  - 4) Restrictions:
    - A) The lease shall not be assigned or otherwise transferred without the prior consent of the State agency with jurisdiction over the land encompassed within the lease.
    - B) The lessee shall ensure that excess gas generated during oil production is captured rather than flared off into the atmosphere.
    - C) The lessee shall not install above-ground flowlines.
    - D) The lessee shall place fencing, with locked gates, around all oil production and storage facilities.
    - E) The lessee shall only install and operate electrically-powered well pumping units.
- c) The leases granted to persons holding a permit to explore shall

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include any additional terms specified in the agreement reached with the State agency with jurisdiction over the land encompassed within the lease. These additional lease terms may include, but are not limited to, any or all of the following considerations:

- 1) the location, use, design and method of construction of the road network constructed by the lessee to gain access to the area being used for oil production and related operations;
  - 2) the location, use, design and method of construction of the electric generation and transmission network constructed by the lessee for oil production and related operations;
  - 3) the location use, design and method of construction of the site(s) where the lessee will conduct oil production and related operations, including the location of the lessee's oil storage tanks;
  - 4) landscaping or other mitigation activities deemed necessary to preserve the environmental and aesthetic characteristics of the State land being used for oil production and related operations; and
  - 5) security and public safety considerations attendant to the lessee's oil production and related operations on State land.
- d) Any permittee who receives a lease of up to one section (640 acres) of land covered by such permittee's exploration permit shall have a preferential right to lease the remaining lands embraced by the permittee's original exploration permit. Specifically, the holder of the exploration permit has the right to lease the remaining lands by meeting the highest bid as to royalty or bonus which the Office may receive if the Office elects to offer the remainder of the lands contained in the permit to explore for lease in accordance with Section 250.60 of this Part. The Office shall notify the permittee of the time and place of the opening of bids in order that the permittee may have present a representative with authority to meet the highest bid as to royalty or bonus. The permittee's failure to have such representative present shall constitute a waiver of its preferential right under this subsection.

**Section 250.50 Designation of Proven Territory**

- a) The Office may designate any State owned land as proven territory if the Office determines that the land is underlain by recoverable oil or gas reserves based upon the producing wells in the vicinity and upon geological data in the Office's possession.
- b) The Office may also designate State owned land as proven territory based upon the discovery of oil or gas pursuant to an exploration permit granted by the Office in accordance with Section 250.30 of this Part.
- c) The Office shall request competitive bids to lease proven territory, as set forth in Section 250.60 below, within one hundred and twenty (120) days after designating such State owned land as proven

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territory.

**Section 250.60 Leasing Proven Territory**

- a) The Office shall provide public notice, in accordance with Section 250.80 of this Part, of the availability of proven territory for lease, subject to competitive bid. The public notice of proven territory shall contain a legal description of the designated land and state that interested parties may request an "invitation for bid" from the Office.
- b) All invitations for bids developed by the Office shall:
  - 1) state the legal description of the land proposed to be leased;
  - 2) include the basic terms and conditions of all leases of State owned land, as enumerated in Section 250.40(b) of this Part;
  - 3) include any additional terms specified by the State agency with jurisdiction over the land encompassed within the lease, as enumerated in Section 250.40(c) of this Part;
  - 4) inform the bidder of the amount of the required bid bond; and
  - 5) state that the bidder must propose a bonus payment for the acquisition of the lease.
- c) No less than five (5) days prior to the opening of the sealed bids, the bidder must file with the Office a bid bond (letter of credit) in the amount fixed by the Office in the bid package, to guarantee the posting of a performance bond in the event he is the successful bidder.
- d) At the date, time and location for bid opening designated in the notice, the Office shall open all bids actually received. Any bid not received at the designated location on or before the designated time shall not be considered in making a determination on high bidder.
- e) The highest responsible bidder shall be contacted and offered a lease containing the terms provided by subsection (b) above, and for the consideration as bid, unless the proven acreage is covered by a permit to explore and a preferential right is granted in accordance with Section 250.40(d) of this Part. If the highest bidder does not wish to accept the lease, then the next highest bidder shall be contacted to lease but the State owned land.
- f) After receipt of all bids, the Office may make a determination that no bid is reasonable and reject them all, notwithstanding the provisions of subsection (a) above. If the Office makes such a determination, the Office may again solicit bids in accordance with this Section or it may choose not to lease out such land.

**Section 250.70 Bonding Requirements**

Prior to drilling any well, lessee shall file an individual well bond with the Office. The bond shall be maintained until the well is plugged and the well site restored in accordance with the Illinois Oil and Gas Act [225 ILCS 725]. The amount of the bond shall be:



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- a) \$1500.00 for a well less than 2,000 feet deep; or
- b) \$3000.00 for a well 2,000 or more feet deep.

**Section 250.80 Public Notice**

All public notices, when required by the provisions of this Part, shall be made as follows:

- a) By placing a notice in one or more oil and gas industry publications distributed statewide and in the Official State Newspaper;
- b) By placing a notice in a newspaper of general circulation in the county in which the State owned land is located; and
- c) Sending notice to persons on the Office Lease Notice List in accordance with Section 250.90 of this Part.

**Section 250.90 Public Lands Lease Notice List**

- a) The Office shall maintain of list of persons entitled to directly receive any public notice required by this Part.
- b) To be placed on the notice list under this Section, a person must submit a written request stating that the person wishes to be placed on the list for notice of any action under this Part requiring public notice and identify the person's name and address. A written request for notice shall be valid for five (5) years from the date of receipt by the Office. A request for notice may be renewed by submitting a new written request.

## DEPARTMENT OF PUBLIC AID

## NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of the Part: Aid to the Aged, Blind or Disabled
- 2) Code Citation: 89 Ill. Adm. Code 113

3) Section Numbers: Proposed Action:

113.1, 113.40, 113.50	Amendment
113.330	Repeal
113.400	Amendment
113.405, 113.410, 113.415	Repeal
113.420, 113.425, 113.430	Repeal
113.435, 113.440, 113.445	Repeal
113.450	Repeal

- 4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, par. 12-13)(305 ILCS 5/12-13) and Public Act 89-21.

- 5) Complete Description of the Subjects and Issues Involved: Pursuant to Public Act 89-21, the Department is making the following changes in the Interim Assistance and Transitional Assistance programs. These proposed amendments are necessary to establish procedures for applications filed on or after July 1, 1995, and to provide for persons receiving Interim Assistance before September 1, 1995. Related changes in the Transitional Assistance program are being proposed in 89 Ill. Adm. Code 114. There are also some changes being proposed in 89 Ill. Adm. Code 110 that relate to these programs.

1. The Interim Assistance program is being abolished effective September 1, 1995. Persons receiving Interim Assistance will continue to do so through August 31, 1995, unless otherwise cancelled under the eligibility requirements of the program. Applications for assistance filed on or after July 1, 1995, will not be considered under the Interim Assistance program but instead will be considered under the Transitional Assistance program. All Interim Assistance cases will be cancelled effective September 1, 1995. Persons cancelled can apply for Transitional Assistance.

2. The eligibility criteria for the Transitional Assistance program is being revised effective July 1, 1995. The following categories are eliminated as categories of eligibility: a) serious medical, physical or mental problem which prevents the client from working; b) lack of a high school diploma or GED, earnings of less than \$2,000 in the last year, lack of earnings of \$200 or more in three of the last 24 months and inability to read English at the 5.9 grade level; c) addictive drug or alcohol abuse problem which prevents the client from working.

3. Effective July 1, 1995, clients who apply for Transitional Assistance

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who claim to be disabled and unable to work and are awaiting a determination of eligibility for Supplemental Security Income (SSI) will be considered for eligibility under a new category. The Department will make a determination of disability for these persons. The determination of disability will use the same criteria as used by the Social Security Administration under the SSI program. If found disabled, the client will be eligible for cash benefits under Transitional Assistance, except as noted below. In addition, the client will be eligible for medical assistance under the Social Security Act due to the Department's determination of disability. If the client is not disabled, the client is ineligible for Transitional Assistance unless eligible under one of the other six remaining categories. If eligible for Transitional Assistance under one of the other six categories, the client will be eligible for medical assistance under the more restrictive General Assistance medical program.

4. Individuals determined disabled whose disability is based solely on substance addictions (drug abuse and alcoholism) and whose disability would cease were their addictions to end will be eligible for medical assistance only and will not receive a cash grant.

5. The Payment Level for Transitional Assistance is being reduced to \$60 per month effective July 1, 1995. This amount will be effective in the City of Chicago, where the Transitional Assistance program is administered by the Department of Public Aid, as well as all local governmental units receiving State funds outside the City of Chicago, where the Transitional Assistance program is administered by the local governmental units. Public Act 89-21 allows the Department to reduce Transitional Assistance cash grants during the fiscal year in order to keep spending within the amount appropriated. If necessary, appropriate changes will be made to Sections 114.351, 114.352 and 114.353.

6. The SSI Advocacy program is retained, though its reference is moved from the Sections on Interim Assistance to the Sections on Transitional Assistance. Individuals determined disabled whose disability is based solely on substance addictions will not be referred to the SSI Advocacy Program.

7. Payment of attorney's fees for the successful representation of SSI and VA applicants before an Administrative Law Judge is retained for clients who receive cash assistance under a General Assistance program administered by the Department of Public Aid. Attorney's fees will not be paid for individuals determined disabled whose disability is based solely on substance addictions, nor for individuals who receive an award for both SSI and SSA benefits.

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6) Will these proposed amendments replace emergency amendments currently in effect? Yes

7) Does this rulemaking contain an automatic repeal date? No

8) Do these proposed amendments contain incorporations by reference? No

9) Are there any other proposed amendments pending on this Part? No

10) Statement of Statewide Policy Objectives: These proposed amendments do not affect units of local government.

11) Time, Place, and Manner in which Interested Persons may comment on this proposed rulemaking: Any interested parties may submit comments, data, views, or arguments concerning this proposed rulemaking. All comments must be in writing and should be addressed to Judy Umunna, Bureau of Rules and Regulations, Illinois Department of Public Aid, 100 South Grand Ave. E., 3rd Floor, Springfield, Illinois 62762 (Phone: (217) 524-3215). The Department requests the submission of written comments within 30 days after the publication of this notice. The Department will consider all written comments it receives during the first notice period as required by Section 5-40 of the Illinois Administrative Procedure Act [5 ILCS 100/5-40].

12) Initial Regulatory Flexibility Analysis:

A) Types of small businesses, small municipalities and not for profit corporations affected: None

B) Reporting, bookkeeping or other procedures required for compliance: None

C) Types of professional skills necessary for compliance: None

13) State reasons for this rulemaking if it was not included in either of the two most recent regulatory agendas: The reasons for this rulemaking are fully described above in the complete description of the subjects and issues involved. This rulemaking was not anticipated by the Department when the two most recent regulatory agendas were published.

The full text of the Proposed Amendments is identical to the text of the Emergency Amendments which appears in this issue of the Register on page

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NOTICE OF PROPOSED AMENDMENTS

1) Heading of the Part: Application Process

2) Code Citation: 89 Ill. Adm. Code 110

3) Section Numbers: Proposed Action:

110.32 Amendment  
110.36 Amendment

4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, par. 3-1a et seq.)(305 ILCS 5/3-1a) and Public Act 89-21.

5) Complete Description of the Subjects and Issues Involved: Pursuant to Public Act 89-21, the Department is making the following changes in the Interim Assistance and Transitional Assistance programs. These proposed amendments are necessary to establish procedures for applications filed on or after July 1, 1995, and to provide for persons receiving Interim Assistance before September 1, 1995. In related rulemaking, changes in the Interim Assistance program are being proposed in 89 Ill. Adm. Code 113 and 114.

1. The Interim Assistance program is being abolished effective September 1, 1995. Persons receiving Interim Assistance will continue to do so through August 31, 1995, unless otherwise cancelled under the eligibility requirements of the program. Applications for assistance filed on or after July 1, 1995, will not be considered under the Interim Assistance program but instead will be considered under the Transitional Assistance program. All Interim Assistance cases will be cancelled effective September 1, 1995. Persons cancelled can apply for Transitional Assistance.

2. The eligibility criteria for the Transitional Assistance program is being revised effective July 1, 1995. The following categories are eliminated as categories of eligibility: a) serious medical, physical or mental problem which prevents the client from working; b) lack of a high school diploma or GED, earnings of less than \$2,000 in the last year, lack of earnings of \$200 or more in three of the last 24 months and inability to read English at the 5.9 grade level; c) addictive drug or alcohol abuse problem which prevents the client from working.

3. Effective July 1, 1995, clients who apply for Transitional Assistance who claim to be disabled and unable to work and are awaiting a determination of eligibility for Supplemental Security Income (SSI) will be considered for eligibility under a new category. The Department will make a determination of disability for these persons. The determination of disability will use the same criteria as used by the Social Security Administration under the SSI program. If found

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disabled, the client will be eligible for cash benefits under Transitional Assistance, except as noted below. In addition, the client will be eligible for medical assistance under the Social Security Act due to the Department's determination of disability. If the client is not disabled, the client is ineligible for Transitional Assistance unless eligible under one of the other six remaining categories. If eligible for Transitional Assistance under one of the other six categories, the client will be eligible for medical assistance under the more restrictive General Assistance medical program.

4. Individuals determined disabled whose disability is based solely on substance addictions (drug abuse and alcoholism) and whose disability would cease were their addictions to end will be eligible for medical assistance only and will not receive a cash grant.

5. The Payment Level for Transitional Assistance is being reduced to \$60 per month effective July 1, 1995. This amount will be effective in the City of Chicago, where the Transitional Assistance program is administered by the Department of Public Aid, as well as all local governmental units receiving State funds outside the City of Chicago, where the Transitional Assistance program is administered by the local governmental units. Public Act 89-21 allows the Department to reduce Transitional Assistance cash grants during the fiscal year in order to keep spending within the amount appropriated. If necessary, appropriate changes will be made to Sections 114.351, 114.352 and 114.353.

6. The SSI Advocacy program is retained, though its reference is moved from the Sections on Interim Assistance to the Sections on Transitional Assistance. Individuals determined disabled whose disability is based solely on substance addictions will not be referred to the SSI Advocacy Program.

7. Payment of attorney's fees for the successful representation of SSI and VA applicants before an Administrative Law Judge is retained for clients who receive cash assistance under a General Assistance program administered by the Department of Public Aid. Attorney's fees will not be paid for individuals determined disabled whose disability is based solely on substance addictions, nor for individuals who receive an award for both SSI and SSA benefits.

6) Will these proposed amendments replace emergency amendments currently in effect? Yes

7) Does this rulemaking contain an automatic repeal date? No

8) Do these proposed amendments contain incorporations by reference? No

## DEPARTMENT OF PUBLIC AID

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- 9) Are there any other proposed amendments pending on this Part? No
- 10) Statement of Statewide Policy Objectives: These proposed amendments do not affect units of local government.
- 11) Time, Place, and Manner in which Interested Persons may comment on this proposed rulemaking: Any interested parties may submit comments, data, views, or arguments concerning this proposed rulemaking. All comments must be in writing and should be addressed to Judy Umunna, Bureau of Rules and Regulations, Illinois Department of Public Aid, 100 South Grand Ave. E., 3rd Floor, Springfield, Illinois 62762 (Phone: (217) 524-3215). The Department requests the submission of written comments within 30 days after the publication of this notice. The Department will consider all written comments it receives during the first notice period as required by Section 5-40 of the Illinois Administrative Procedure Act [5 ILCS 100/5-40].
- 12) Initial Regulatory Flexibility Analysis:
- A) Types of small businesses, small municipalities and not for profit corporations affected: None
- B) Reporting, bookkeeping or other procedures required for compliance: None
- C) Types of professional skills necessary for compliance: None

- 13) State reasons for this rulemaking if it was not included in either of the two most recent regulatory agendas: The reasons for this rulemaking are fully described above in the complete description of the subjects and issues involved. This rulemaking was not anticipated by the Department when the two most recent regulatory agendas were published.

The full text of the Proposed Amendments is identical to the text of the Emergency Amendments which appears in this issue of the Register on page 8432 1

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## NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of the Part: General Assistance
- 2) Code Citation: 89 Ill. Adm. Code 114
- 3) Section Number: Proposed Action:  
     114.1, 114.2 Amendment  
     114.3 New Section  
     114.351, 114.352, 114.353 Amendment  
     114.402, 114.440 Amendment  
     114.442 New Section
- 4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, Ch. 23, par. 12-13)[305 ILCS 5/12-13] and Public Act 89-21.
- 5) Complete Description of the Subjects and Issues Involved: Pursuant to Public Act 89-21, the Department is making the following changes in the Interim Assistance and Transitional Assistance programs. These proposed amendments are necessary to establish procedures for applications filed on or after July 1, 1995, and to provide for persons receiving Interim Assistance before September 1, 1995. Related changes in the Interim Assistance program are being proposed in 89 Ill. Adm. Code 113. There are also some changes being proposed in 89 Ill. Adm. Code 110 that relate to these programs.
1. The Interim Assistance program is being abolished effective September 1, 1995. Persons receiving Interim Assistance will continue to do so through August 31, 1995, unless otherwise cancelled under the eligibility requirements of the program. Applications for assistance filed on or after July 1, 1995, will not be considered under the Interim Assistance program but instead will be considered under the Transitional Assistance program. All Interim Assistance cases will be cancelled effective September 1, 1995. Persons cancelled can apply for Transitional Assistance.
  2. The eligibility criteria for the Transitional Assistance program is being revised effective July 1, 1995. The following categories are eliminated as categories of eligibility: a) serious medical, physical or mental problem which prevents the client from working; b) lack of a high school diploma or GED, earnings of less than \$2,000 in the last year, lack of earnings of \$200 or more in three of the last 24 months and inability to read English at the 5.9 grade level; c) addictive drug or alcohol abuse problem which prevents the client from working.
  3. Effective July 1, 1995, clients who apply for Transitional Assistance who claim to be disabled and unable to work and are awaiting a determination of eligibility for Supplemental Security Income (SSI)



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will be considered for eligibility under a new category. The Department will make a determination of disability for these persons. The determination of disability will use the same criteria as used by the Social Security Administration under the SSI program. If found disabled, the client will be eligible for cash benefits under Transitional Assistance, except as noted below. In addition, the client will be eligible for medical assistance under the Social Security Act due to the Department's determination of disability. If the client is not disabled, the client is ineligible for Transitional Assistance unless eligible under one of the other six remaining categories. If eligible for Transitional Assistance under one of the other six categories, the client will be eligible for medical assistance under the more restrictive General Assistance medical program.

4. Individuals determined disabled whose disability is based solely on substance additions (drug abuse and alcoholism) and whose disability would cease were their additions to end will be eligible for medical assistance only and will not receive a cash grant.

5. The Payment Level for Transitional Assistance is being reduced to \$60 per month effective July 1, 1995. This amount will be effective in the City of Chicago, where the Transitional Assistance program is administered by the Department of Public Aid, as well as all local governmental units receiving State funds outside the City of Chicago, where the Transitional Assistance program is administered by the local governmental units. Public Act 89-21 allows the Department to reduce Transitional Assistance cash grants during the fiscal year in order to keep spending within the amount appropriated. If necessary, appropriate changes will be made to Sections 114.351, 114.352 and 114.353.

6. The SSI Advocacy program is retained, though its reference is moved from the Sections on Interim Assistance to the Sections on Transitional Assistance. Individuals determined disabled whose disability is based solely on substance additions will not be referred to the SSI Advocacy Program.

7. Payment of attorney's fees for the successful representation of SSI and VA applicants before an Administrative Law Judge is retained for clients who receive cash assistance under a General Assistance program administered by the Department of Public Aid. Attorney's fees will not be paid for individuals determined disabled whose disability is based solely on substance additions, nor for individuals who receive an award for both SSI and SSA benefits.

6) Will these proposed amendments replace emergency amendments currently in effect? Yes

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- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Do these proposed amendments contain incorporations by reference? No
- 9) Are there any other proposed amendments pending on this part? No

10) Statement of Statewide Policy Objectives: These proposed amendments do not affect units of local government.

11) Time, Place, and Manner in which Interested Persons may comment on this proposed rulemaking: Any interested parties may submit comments, data, views, or arguments concerning this proposed rulemaking. All comments must be in writing and should be addressed to Judy Umunna, Bureau of Rules and Regulations, Illinois Department of Public Aid, 100 South Grand Ave. E., 3rd Floor, Springfield, Illinois 62762 (Phone: (217) 524-3215). The Department requests the submission of written comments within 30 days after the publication of this notice. The Department will consider all written comments it receives during the first notice period as required by Section 5-40 of the Illinois Administrative Procedure Act [5 ILCS 100/5-40].

12) Initial Regulatory Flexibility Analysis:

A) Types of small businesses, small municipalities and not for profit corporations affected: None

B) Reporting, bookkeeping or other procedures required for compliance: None

C) Types of professional skills necessary for compliance: None

13) State reasons for this rulemaking if it was not included in either of the two most recent regulatory agendas: The reasons for this rulemaking are fully described above in the complete description of the subjects and issues involved. This rulemaking was not anticipated by the Department when the two most recent regulatory agendas were published.

The full text of the Proposed Amendments is identical to the text of the Emergency Amendments which appears in this issue of the Register on page

## DEPARTMENT OF PUBLIC AID

## NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of the Part: Medical Payment
- 2) Code Citation: 89 Ill. Adm. Code 140
- 3) Section Numbers:
- |       |           |
|-------|-----------|
| 140.3 | Amendment |
| 140.5 | Amendment |
- 4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, par. 12-13) [305 ILCS 5/12-13]
- 5) Complete Description of the Subjects and Issues Involved: These proposed amendments are being filed in conjunction with the State's budget plan for fiscal year 1996, by providing for cost containment measures in some areas of the Department's medical assistance programs. The initiatives contained in these amendments are necessary to control costs associated with medical services covered by the Department, and thereby meet restrictions imposed by the new budget plan.
- Under these proposed amendments, coverage for medical services will be reduced, effective July 1, 1995. This reduction in medical coverage will affect certain services which are not mandatory under the federal Medicaid program. Optional Medicaid funded care will be eliminated, for recipients age 21 or over, for dental services, chiropractic services, podiatric services, hospice services, and optical services and supplies. However, coverage will continue for hospice services for Medicare recipients residing in long term care facilities, as mandated by federal law at 42 USC 1396d(o).
- Reduced medical coverage will also affect recipients of financial assistance under General Assistance for the State Transitional Program and the State Family and Children Program, by eliminating coverage for dental services, hospice services, and optical services and supplies.
- These cost containment measures are necessary for the implementation of the fiscal year 1996 budget plan, to permit the Department to continue to provide adequate reimbursement levels for essential medical services and to prevent excessive and unnecessary expenditures.
- The Department estimates that the reduction in overall spending for medical services, resulting from the proposed elimination of coverage for certain medical services, will be approximately \$34.4 million for fiscal year 1996. The breakdown of this decrease in spending, per medical service, is as follows: dental, \$22.3 million; chiropractic, \$200,000; podiatric, \$600,000; optical, \$1.3 million; and hospice, \$10 million.
- 6) Will these proposed amendments replace emergency amendments currently in

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- effect? Yes
- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Do these proposed amendments contain incorporations by reference? No
- 9) Are there any other proposed amendments pending on this Part? Yes
- | Sections | Proposed Action | Illinois Register Citation         |
|----------|-----------------|------------------------------------|
| 140.27   | Amendment       | May 5, 1995 (19 Ill. Reg. 6268)    |
| 140.80   | Amendment       | March 17, 1995 (19 Ill. Reg. 3248) |
| 140.80   | Amendment       | March 24, 1995 (19 Ill. Reg. 4337) |
| 140.82   | Amendment       | March 17, 1995 (19 Ill. Reg. 3248) |
| 140.82   | Amendment       | March 24, 1995 (19 Ill. Reg. 4337) |
| 140.84   | Amendment       | March 17, 1995 (19 Ill. Reg. 3248) |
| 140.84   | Amendment       | March 24, 1995 (19 Ill. Reg. 4337) |
| 140.642  | Amendment       | April 14, 1995 (19 Ill. Reg. 5397) |
- 10) Statement of Statewide Policy Objectives: These proposed amendments do not affect units of local government.
- 11) Time, Place, and Manner in which Interested Persons may comment on this proposed rulemaking: Any interested parties may submit comments, data, views, or arguments concerning this proposed rulemaking. All comments must be in writing and should be addressed to Joanne Jones, Bureau of Rules and Regulations, Illinois Department of Public Aid, 100 South Grand Ave., 3rd Floor, Springfield, Illinois 62762 (Phone: (217) 524-3215). The Department requests the submission of written comments within 30 days after the publication of this notice. The Department will consider all written comments it receives during the first notice period as required by Section 5-40 of the Illinois Administrative Procedure Act [5 ILCS 100/5-40].
- Any interested persons may review these amendments at the Department of Public Aid's local offices located in each county (except Cook County). In Cook County, the amendments may be reviewed at the Office of the Director, Illinois Department of Public Aid, 310 South Michigan Avenue, Suite 1700, Chicago, Illinois. The amendments may be reviewed at all offices Monday through Friday from 8:30 A.M. until 5:00 P.M. These copies of the amendments are being made available for review in accordance with federal requirements at 42 CFR 447.205.
- These proposed amendments may have an impact on small businesses, small municipalities, and not for profit corporations as defined in Sections 1-75, 1-80 and 1-85 of the Illinois Administrative Procedure Act [5 ILCS 100/1-75, 1-80, 1-85]. These entities may submit comments in writing to the Department at the above address in accordance with the regulatory



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flexibility provisions in Section 5-30 of the Illinois Administrative Procedure Act [5 ILCS 100/5-30]. These entities shall indicate their status as small businesses, small municipalities, or not-for-profit corporations as part of any written comments they submit to the Department.

12) Initial Regulatory Flexibility Analysis:

- A) Types of small businesses, small municipalities and not for profit corporations affected: Providers of dental, chiropractic, podiatric, optical and hospice services.
- B) Reporting, bookkeeping or other procedures required for compliance:  
None
- C) Types of professional skills necessary for compliance: None

- 13) State reasons for this rulemaking if it was not included in either of the two most recent regulatory agendas: The reasons for this rulemaking are fully described above in the complete description of the subjects and issues involved. This rulemaking was not anticipated by the Department when the two most recent regulatory agendas were published.

The full text of the Proposed Amendments begins on the next page:

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TITLE 89: SOCIAL SERVICES  
CHAPTER I: DEPARTMENT OF PUBLIC AID  
SUBCHAPTER d: MEDICAL PROGRAMS

## PART 140

## MEDICAL PAYMENT

## SUBPART A: GENERAL PROVISIONS

## Section

140.1 Incorporation By Reference

140.2 Medical Assistance Programs

140.3 Covered Services Under the Medical Assistance Programs for APBG7 APBG-MANG7--AAB7--AAB8-MANG7--RRP7--Individuals--Under--Age--18--Not Eligible for APBG7-Pregnant Women Who Would Be Eligible if the Child Were Born and Pregnant Women and Children Under Age Eight Who Not Meet--Born and Pregnant Women and Children Under Age Eight Who Not Qualify as Mandatory Categorically Needy and Disabled Persons--Under Age 21 Who May Qualify for Medicaid and in Home Care--Model Waiver

140.4 Covered Medical Services Under AFDC-MANG for non-pregnant persons who are 18 years of age or older (Repealed)

140.5 Covered Medical Services Under General Assistance GA

140.6 Medical Services Not Covered

140.7 Medical Assistance Provided to Individuals Under the Age of Eighteen Who Do Not Qualify for AFDC and Children Under Age Eight

140.8 Medical Assistance For Qualified Severely Impaired Individuals

140.9 Medical Assistance for a Pregnant Woman Who Would Not Be Categorically Eligible for AFDC/AFDC-MANG if the Child Were Already Born Or Who Do Not Qualify As Mandatory Categorically Needy

140.10 Medical Assistance Provided to Incarcerated Persons

## SUBPART B: MEDICAL PROVIDER PARTICIPATION

## Section

140.11 Enrollment Conditions for Medical Providers

140.12 Participation Requirements for Medical Providers

140.13 Definitions

140.14 Denial of Application to Participate in the Medical Assistance Program

140.15 Recovery of Money

140.16 Termination or Suspension of a Vendor's Eligibility to Participate in the Medical Assistance Program

140.17 Suspension of a Vendor's Eligibility to Participate in the Medical Assistance Program

140.18 Effect of Termination on Individuals Associated with Vendor

140.19 Application to Participate or for Reinstatement Subsequent to Termination, Suspension or Barring

140.20 Submittal of Claims

140.21 Covered Medicaid Services for Qualified Medicare Beneficiaries (QMBs)

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140.22 Magnetic Tape Billings  
 140.23 Payment of Claims  
 140.24 Payment Procedures  
 140.25 Overpayment or Underpayment of Claims  
 140.26 Payment to Factors Prohibited  
 140.27 Assignment of Vendor Payments  
 140.28 Record Requirements for Medical Providers  
 140.30 Audits  
 140.31 Emergency Services Audits  
 140.32 Prohibition on Participation, and Special Permission for Participation  
 140.33 Publication of List of Terminated, Suspended or Barred Entities  
 140.35 False Reporting and Other Fraudulent Activities  
 140.40 Prior Approval for Medical Services or Items  
 140.41 Prior Approval in Cases of Emergency  
 140.42 Limitation on Prior Approval  
 140.43 Post Approval for Items or Services When Prior Approval Cannot Be Obtained  
 140.71 Reimbursement for Medical Services Through the Use of a C-13 Invoice  
 140.72 Voucher Advance Payment and Expedited Payments  
 140.73 Drug Manual Updates (Recodified)

## SUBPART C: PROVIDER ASSESSMENTS

Section  
 140.80 Hospital Provider Fund  
 140.82 Developmentally Disabled Care Provider Fund  
 140.84 Long Term Care Provider Fund  
 140.94 Medicaid Developmentally Disabled Provider Participation Fee Trust  
 Fund/Medicaid Long Term Care Provider Participation Fee Trust Fund  
 140.95 Hospital Services Trust Fund  
 140.96 General Requirements (Recodified)  
 140.97 Special Requirements (Recodified)  
 140.98 Covered Hospital Services (Recodified)  
 140.99 Hospital Services Not Covered (Recodified)  
 140.100 Limitation on Hospital Services (Recodified)  
 140.101 Transplants (Recodified)  
 140.102 Heart Transplants (Recodified)  
 140.103 Liver Transplants (Recodified)  
 140.104 Bone Marrow Transplants (Recodified)  
 140.110 Disproportionate Share Hospital Adjustments (Recodified)  
 140.116 Payment for Inpatient Services for GA (Recodified)  
 140.117 Hospital Outpatient and Clinic Services (Recodified)  
 140.200 Payment for Hospital Services During Fiscal Year 1982 (Recodified)  
 140.201 Payment for Hospital Services During Fiscal Year 1982 (Recodified)  
 140.202 Payment for Hospital Services During Fiscal Year 1983 (Recodified)  
 140.203 Limits on Length of Stay by Diagnosis (Recodified)

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140.300 Payment for Pre-operative Days and Services Which Can Be Performed in an Outpatient Setting (Recodified)  
 140.350 Copayments (Recodified)  
 140.360 Payment Methodology (Recodified)  
 140.361 Non-Participating Hospitals (Recodified)  
 140.362 Pre July 1, 1989 Services (Recodified)  
 140.363 Post June 30, 1989 Services (Recodified)  
 140.364 Prepayment Review (Recodified)  
 140.365 Base Year Costs (Recodified)  
 140.366 Restructuring Adjustment (Recodified)  
 140.367 Inflation Adjustment (Recodified)  
 140.368 Volume Adjustment (Repealed)  
 140.369 Groupings (Recodified)  
 140.370 Rate Calculation (Recodified)  
 140.371 Payment (Recodified)  
 140.372 Review Procedure (Recodified)  
 140.373 Utilization (Repealed)  
 140.374 Alternatives (Recodified)  
 140.375 Exemptions (Recodified)  
 140.376 Utilization, Case-Mix and Discretionary Funds (Repealed)  
 140.390 Subacute Alcoholism and Substance Abuse Services (Recodified)  
 140.391 Definitions (Recodified)  
 140.392 Types of Subacute Alcoholism and Substance Abuse Services (Recodified)  
 140.394 Payment for Subacute Alcoholism and Substance Abuse Services (Recodified)  
 140.396 Rate Appeals for Subacute Alcoholism and Substance Abuse Services (Recodified)  
 140.398 Hearings (Recodified)

## SUBPART D: PAYMENT FOR NON-INSTITUTIONAL SERVICES

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 140.400 Payment to Practitioners, Nurses and Laboratories  
 140.410 Physicians' Services  
 140.411 Covered Services By Physicians  
 140.412 Services Not Covered By Physicians  
 140.413 Limitation on Physician Services  
 140.414 Requirements for Prescriptions and Dispensing of Pharmacy Items - Physicians  
 140.416 Optometric Services and Materials  
 140.417 Limitations on Optometric Services  
 140.418 Department of Corrections Laboratory  
 140.420 Dental Services  
 140.421 Limitations on Dental Services  
 140.422 Requirements for Prescriptions and Dispensing Items of Pharmacy Items - Dentists  
 140.425 Podiatry Services



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140.426	Limitations on Podiatry Services
140.427	Requirement for Prescriptions and Dispensing of Pharmacy Items - Podiatry
140.428	Chiropractic Services
140.429	Limitations on Chiropractic Services (Repealed)
140.430	Independent Laboratory Services
140.431	Services Not Covered by Independent Laboratory
140.432	Limitations on Independent Laboratory Services
140.433	Payment for Laboratory Services
140.434	Record Requirements for Independent Laboratories
140.435	Nurse Services
140.436	Limitations on Nurse Services
140.440	Pharmacy Services
140.441	Pharmacy Services Not Covered
140.442	Prior Approval of Prescriptions
140.443	Filling of Prescriptions
140.444	Compounded Prescriptions
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140.446	Over-the-Counter Items
140.447	Reimbursement
140.448	Returned Pharmacy Items
140.449	Payment of Pharmacy Items
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140.452	Mental Health Clinic Services
140.453	Definitions
140.454	Types of Mental Health Clinic Services
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140.456	Hearings
140.457	Therapy Services
140.458	Prior Approval for Therapy Services
140.459	Payment for Therapy Services
140.460	Clinic Services
140.461	Clinic Participation, Data and Certification
140.462	Covered Services in Clinics
140.463	Clinic Service Payment
140.464	Healthy Moms/Healthy Kids Managed Care Clinics
140.465	Speech and Hearing Clinics (Repealed)
140.466	Rural Health Clinics
140.467	Independent Clinics
140.469	Hospice
140.470	Home Health Services
140.471	Home Health Covered Services
140.472	Types of Home Health Services
140.473	Prior Approval for Home Health Services
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140.477	Limitations on Equipment, Supplies and Prosthetic Devices
140.478	Prior Approval for Medical Equipment, Supplies and Prosthetic Devices
140.479	Limitations, Medical Supplies
140.480	Equipment Rental Limitations
140.481	Payment for Medical Equipment, Supplies and Prosthetic Devices
140.482	Family Planning Services
140.483	Limitations on Family Planning Services
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140.485	Healthy Kids Program
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140.487	Healthy Kids Program Timeliness Standards
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140.490	Medical Transportation
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140.495	Psychological Services
140.496	Payment for Psychological Services
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140.503	Cessation of Payment for Improper Level of Care
140.504	Cessation of Payment Because of Termination of Facility
140.505	Continuation of Payment Because of Threat To Life
140.506	Provider Voluntary Withdrawal
140.507	Continuation of Provider Agreement
140.510	Determination of Need for Group Care
140.511	Long Term Care Services Covered by Department Payment
140.512	Utilization Control
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140.514	Certifications and Recertifications of Care
140.515	Management of Recipient Funds--Personal Allowance Funds
140.516	Recipient Management of Funds
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140.518	Facility Management of Funds
140.519	Use or Accumulation of Funds
140.520	Management of Recipient Funds--Local Office Responsibility
140.521	Room and Board Accounts
140.522	Reconciliation of Recipient Funds
140.523	Bed Reserves
140.524	Cessation of Payment Due to Loss of License
140.525	Quality Incentive Program (QUIP) Payment Levels
140.526	Quality Incentive Standards and Criteria for the Quality Incentive Program (QUIP) (Repealed)

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140.527	Quality Incentive Survey (Repealed)
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140.529	Reviews (Repealed)
140.530	Basis of Payment for Long Term Care Services
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140.552	Nursing and Program Costs
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140.642	Screening Assessment for Long Term Care and Alternative Residential Settings and Services
140.643	In-Home Care Program
140.645	Home and Community Based Service Waivers for Medically Fragile, Technology Dependent, Disabled Persons Under Age 21
140.646	Reimbursement for Developmental Training (DT) Services for Individuals with Developmental Disabilities Who Reside in Long Term Care (ICF AND SNF) and Residential (ICF/MR) Facilities
140.647	Description of Developmental Training (DT) Services
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140.885	Provider Responsibilities (Repealed)
140.890	Payment Methodology (Repealed)
140.895	Contract Monitoring (Repealed)
140.896	Reimbursement For Program Costs (Active Treatment) For Clients In Long Term Care Facilities For The Developmentally Disabled (Recodified)
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140.900	Reimbursement For Nursing Costs For Geriatric Residents in Group Care Facilities (Recodified)
140.901	Functional Areas of Needs (Recodified)
140.902	Service Needs (Recodified)



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140.903	Definitions (Recodified)
140.904	Times and Staff Levels (Repealed)
140.905	Statewide Rates (Repealed)
140.906	Reconsiderations (Recodified)
140.907	Midnight Census Report (Recodified)
140.908	Times and Staff Levels (Recodified)
140.909	Statewide Rates (Recodified)
140.910	Referrals (Recodified)
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140.920	General Description
140.922	Covered Services
140.924	Provider Participation
140.926	Client Eligibility
140.928	Client Enrollment and Program Components
140.930	Reimbursement
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140.940	Definition of Terms (Recodified)
140.942	Notification of Negotiations (Recodified)
140.944	Hospital Participation in ICARE Program Negotiations (Recodified)
140.946	Negotiation Procedures (Recodified)
140.948	Factors Considered in Awarding ICARE Contracts (Recodified)
140.950	Closing an ICARE Area (Recodified)
140.952	Administrative Review (Recodified)
140.954	Payments to Contracting Hospitals (Recodified)
140.956	Admitting and Clinical Privileges (Recodified)
140.958	Inpatient Hospital Care or Services by Non-Contracting Hospitals
140.960	Eligible for Payment (Recodified)
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140.964	Contract Monitoring (Recodified)
140.966	Transfer of Recipients (Recodified)
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140.972	Hospital Services Procurement Advisory Board (Recodified)
TABLE A	Medichex Recommended Screening Procedures (Repealed)
TABLE B	Health Service Areas
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TABLE F	Podiatry Service Schedule
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TABLE J	HSA Grouping (Repealed)
TABLE K	Services Qualifying for 10% Add-On (Repealed)
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TABLE M	Enhanced Rates for Healthy Moms/Healthy Kids Provider Services

AUTHORITY: Implementing Article III of the Illinois Health Finance Reform Act [20 ILCS 2215/Art. III] and implementing and authorized by Articles III, IV, V, VI, VII and Section 12-13 of the Illinois Public Aid Code [305 ILCS 5.Arts. III, IV, V, VI, VII, and 12-13].

SOURCE: Adopted at 3 Ill. Reg. 24, p. 166, effective June 10, 1979; rule repealed and new rule adopted at 6 Ill. Reg. 8374, effective July 6, 1982; emergency amendment at 6 Ill. Reg. 8508, effective July 6, 1982, for a maximum of 150 days; amended at 7 Ill. Reg. 681, effective December 30, 1982; amended at 7 Ill. Reg. 7956, effective July 1, 1983; amended at 7 Ill. Reg. 8308, effective July 1, 1983; amended at 7 Ill. Reg. 8271, effective July 5, 1983; emergency amendment at 7 Ill. Reg. 8354, effective July 5, 1983, for a maximum of 150 days; amended at 7 Ill. Reg. 8540, effective July 15, 1983; amended at 7 Ill. Reg. 9382, effective July 22, 1983; amended at 7 Ill. Reg. 12868, effective September 20, 1983; peremptory amendment at 7 Ill. Reg. 15047, effective October 31, 1983; amended at 7 Ill. Reg. 17358, effective December 21, 1983; amended at 8 Ill. Reg. 254, effective December 21, 1983; emergency amendment at 8 Ill. Reg. 580, effective January 1, 1984, for a maximum of 150 days; recodified at 8 Ill. Reg. 2483; amended at 8 Ill. Reg. 3012, effective February 22, 1984; amended at 8 Ill. Reg. 5282, effective April 9, 1984; amended at 8 Ill. Reg. 6785, effective April 27, 1984; amended at 8 Ill. Reg. 6983, effective May 9, 1984; amended at 8 Ill. Reg. 7258, effective May 16, 1984; emergency amendment at 8 Ill. Reg. 7910, effective May 22, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 7910, effective June 1, 1984; amended at 8 Ill. Reg. 10032, effective June 18, 1984; emergency amendment at 8 Ill. Reg. 10062, effective June 20, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 13343, effective July 17, 1984; amended at 8 Ill. Reg. 13779, effective July 24, 1984; Sections 140.72 and 140.73 recodified to 89 Ill. Adm. Code 141 at 8 Ill. Reg. 16354; amended (by adding sections being codified with no substantive change) at 8 Ill. Reg. 17899; peremptory amendment at 8 Ill. Reg. 18151, effective September 18, 1984; amended at 8 Ill. Reg. 21629, effective October 19, 1984; peremptory amendment at 8 Ill. Reg. 21677, effective October 24, 1984; amended at 8 Ill. Reg. 22097, effective October 24, 1984; peremptory amendment at 8 Ill. Reg. 22155, effective October 29, 1984; amended at 8 Ill. Reg. 23218, effective November 20, 1984; emergency amendment at 8 Ill. Reg. 23721, effective November 21, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 25067, effective December 19, 1984; emergency amendment at 9 Ill. Reg. 407, effective January 1, 1985, for a maximum of 150 days;

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amended at 9 Ill. Reg. 2697, effective February 22, 1985; amended at 9 Ill. Reg. 6235, effective April 29, 1985; amended at 9 Ill. Reg. 8677, effective May 28, 1985; amended at 9 Ill. Reg. 9564, effective June 5, 1985; amended at 9 Ill. Reg. 10025, effective June 26, 1985; emergency amendment at 9 Ill. Reg. 11403, effective June 27, 1985, for a maximum of 150 days; amended at 9 Ill. Reg. 11357, effective June 28, 1985; amended at 9 Ill. Reg. 12000, effective July 24, 1985; amended at 9 Ill. Reg. 12306, effective August 5, 1985; amended at 9 Ill. Reg. 13998, effective September 3, 1985; amended at 9 Ill. Reg. 14684, effective September 13, 1985; amended at 9 Ill. Reg. 15503, effective October 4, 1985; amended at 9 Ill. Reg. 16312, effective October 11, 1985; amended at 9 Ill. Reg. 19138, effective December 2, 1985; amended at 9 Ill. Reg. 19737, effective December 9, 1985; amended at 10 Ill. Reg. 238, effective December 27, 1985; emergency amendment at 10 Ill. Reg. 798, effective January 1, 1986, for a maximum of 150 days; amended at 10 Ill. Reg. 672, effective January 6, 1986; amended at 10 Ill. Reg. 1206, effective January 13, 1986; amended at 10 Ill. Reg. 3041, effective January 24, 1986; amended at 10 Ill. Reg. 6981, effective April 16, 1986; amended at 10 Ill. Reg. 7825, effective April 30, 1986; amended at 10 Ill. Reg. 8128, effective May 7, 1986; emergency amendment at 10 Ill. Reg. 8912, effective May 13, 1986, for a maximum of 150 days; amended at 10 Ill. Reg. 11440, effective June 20, 1986; amended at 10 Ill. Reg. 14714, effective August 27, 1986; amended at 10 Ill. Reg. 15211, effective September 12, 1986; emergency amendment at 10 Ill. Reg. 16729, effective September 18, 1986, for a maximum of 150 days; amended at 10 Ill. Reg. 18808, effective October 24, 1986; amended at 10 Ill. Reg. 19742, effective November 12, 1986; amended at 10 Ill. Reg. 21784, effective December 15, 1986; amended at 11 Ill. Reg. 698, effective December 19, 1986; amended at 11 Ill. Reg. 1418, effective December 31, 1986; amended at 11 Ill. Reg. 2323, effective January 16, 1987; amended at 11 Ill. Reg. 4002, effective February 25, 1987; Section 140.71 recodified to 89 Ill. Adm. Code 141 at 11 Ill. Reg. 4302; amended at 11 Ill. Reg. 4303, effective March 6, 1987; amended at 11 Ill. Reg. 7664, effective April 15, 1987; emergency amendment at 11 Ill. Reg. 9342, effective April 20, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 9169, effective April 28, 1987; amended at 11 Ill. Reg. 10903, effective June 1, 1987; amended at 11 Ill. Reg. 11528, effective June 22, 1987; amended at 11 Ill. Reg. 12011, effective June 30, 1987; amended at 11 Ill. Reg. 12290, effective July 6, 1987; amended at 11 Ill. Reg. 14048, effective August 14, 1987; amended at 11 Ill. Reg. 14771, effective August 25, 1987; amended at 11 Ill. Reg. 16758, effective September 28, 1987; amended at 11 Ill. Reg. 17295, effective September 30, 1987; amended at 11 Ill. Reg. 18696, effective October 27, 1987; amended at 11 Ill. Reg. 20909, effective December 14, 1987; amended at 12 Ill. Reg. 916, effective January 1, 1988; emergency amendment at 12 Ill. Reg. 1960, effective January 1, 1988, for a maximum of 150 days; amended at 12 Ill. Reg. 5427, effective March 15, 1988; amended at 12 Ill. Reg. 6246, effective March 16, 1988; amended at 12 Ill. Reg. 6728, effective March 22, 1988; Sections 140.900 thru 140.912 and 140.912 H and 140.912 I recodified to 89 Ill. Adm. Code 147.5 thru 147.205 and 147.205 A and 147.205 B at 12 Ill. Reg. 6956; amended at 12 Ill. Reg. 6927, effective April 5, 1988; Sections 140.940 thru 140.972 recodified to 89 Ill. Adm. Code 149.5 thru 149.325 at 12

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Ill. Reg. 7401; amended at 12 Ill. Reg. 7695, effective April 21, 1988; amended at 12 Ill. Reg. 10497, effective June 3, 1988; amended at 12 Ill. Reg. 10717, effective June 14, 1988; emergency amendment at 12 Ill. Reg. 11868, effective July 1, 1988, for a maximum of 150 days; amended at 12 Ill. Reg. 12509, effective July 15, 1988; amended at 12 Ill. Reg. 14771, effective August 29, 1988; emergency amendment at 12 Ill. Reg. 16921, effective September 28, 1988, for a maximum of 150 days; amended at 12 Ill. Reg. 16738, effective October 5, 1988; amended at 12 Ill. Reg. 17879, effective October 24, 1988; amended at 12 Ill. Reg. 18198, effective November 4, 1988; amended at 12 Ill. Reg. 19396, effective November 6, 1988; amended at 12 Ill. Reg. 19734, effective November 15, 1988; amended at 13 Ill. Reg. 125, effective January 1, 1989; amended at 13 Ill. Reg. 2475, effective February 14, 1989; amended at 13 Ill. Reg. 3069, effective February 28, 1989; amended at 13 Ill. Reg. 3351, effective March 6, 1989; amended at 13 Ill. Reg. 3917, effective March 17, 1989; amended at 13 Ill. Reg. 5115, effective April 3, 1989; amended at 13 Ill. Reg. 5718, effective April 10, 1989; amended at 13 Ill. Reg. 7025, effective April 24, 1989; Sections 140.850 thru 140.896 recodified to 89 Ill. Adm. Code 146.5 thru 146.225 at 13 Ill. Reg. 7040; amended at 13 Ill. Reg. 7786, effective May 20, 1989; Sections 140.94 thru 140.398 recodified to 89 Ill. Adm. Code 148.10 thru 148.390 at 13 Ill. Reg. 9572; emergency amendment at 13 Ill. Reg. 10977, effective July 1, 1989, for a maximum of 150 days; amended at 13 Ill. Reg. 11516, effective July 3, 1989; amended at 13 Ill. Reg. 12119, effective July 7, 1989; Section 140.110 recodified to 89 Ill. Adm. Code 148.120 at 13 Ill. Reg. 12118; amended at 13 Ill. Reg. 12562, effective July 17, 1989; amended at 13 Ill. Reg. 14391, effective August 31, 1989; emergency amendment at 13 Ill. Reg. 15473, effective September 12, 1989, for a maximum of 150 days; amended at 13 Ill. Reg. 16992, effective October 16, 1989; amended at 14 Ill. Reg. 190, effective December 21, 1989; amended at 14 Ill. Reg. 2564, effective February 9, 1990; emergency amendment at 14 Ill. Reg. 3241, effective February 14, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 4543, effective March 12, 1990; emergency amendment at 14 Ill. Reg. 4577, effective March 6, 1990, for a maximum of 150 days; emergency expired August 3, 1990; emergency amendment at 14 Ill. Reg. 5575, effective April 1, 1990, for a maximum of 150 days; emergency expired August 29, 1990; emergency amendment at 14 Ill. Reg. 5865, effective April 3, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 7141, effective April 27, 1990; emergency amendment at 14 Ill. Reg. 7249, effective April 27, 1990; emergency amendment at 14 Ill. Reg. 7249, effective June 12, 1990; amended at 14 Ill. Reg. 10409, effective June 19, 1990; emergency amendment at 14 Ill. Reg. 12082, effective July 5, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 13262, effective August 6, 1990; emergency amendment at 14 Ill. Reg. 14184, effective August 16, 1990, for a maximum of 150 days; emergency amendment at 14 Ill. Reg. 14570, effective August 22, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 14826, effective August 31, 1990; amended at 14 Ill. Reg. 15366, effective September 12, 1990; amended at 14 Ill. Reg. 15981, effective September 21, 1990; amended at 14 Ill. Reg. 18057, effective October 12, 1990; amended at 14 Ill. Reg. 18057, effective October 22, 1990; amended at 14 Ill. Reg. 18508, effective



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October 30, 1990; amended at 14 Ill. Reg. 20478, effective December 7, 1990; amended at 14 Ill. Reg. 20729, effective December 12, 1990; amended at 15 Ill. Reg. 298, effective December 28, 1990; emergency amendment at 15 Ill. Reg. 592, effective January 1, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 1051, effective January 18, 1991; Section 140.569 withdrawn at 15 Ill. Reg. 1174; amended at 15 Ill. Reg. 6220, effective April 18, 1991; amended at 15 Ill. Reg. 6534, effective April 30, 1991; amended at 15 Ill. Reg. 8264, effective May 23, 1991; amended at 15 Ill. Reg. 8972, effective June 17, 1991; amended at 15 Ill. Reg. 10114, effective June 21, 1991; amended at 15 Ill. Reg. 10468, effective July 1, 1991; amended at 15 Ill. Reg. 11176, effective August 1, 1991; emergency amendment at 15 Ill. Reg. 11515, effective July 25, 1991, for a maximum of 150 days; emergency amendment at 15 Ill. Reg. 12919, effective August 15, 1991, for a maximum of 150 days; emergency expired January 12, 1992; emergency amendment at 15 Ill. Reg. 16355, effective October 22, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 17318, effective November 18, 1991; amended at 15 Ill. Reg. 17733, effective November 22, 1991; emergency amendment at 16 Ill. Reg. 300, effective December 20, 1991, for a maximum of 150 days; amended at 16 Ill. Reg. 174, effective December 24, 1991; amended at 16 Ill. Reg. 1877, effective January 24, 1992; amended at 16 Ill. Reg. 3552, effective February 28, 1992; amended at 16 Ill. Reg. 4006, effective March 6, 1992; amended at 16 Ill. Reg. 6408, effective March 20, 1992; amended at 16 Ill. Reg. 6843, effective April 7, 1992; amended at 16 Ill. Reg. 7017, effective April 17, 1992; amended at 16 Ill. Reg. 10050, effective June 5, 1992; amended at 16 Ill. Reg. 11174, effective June 26, 1992; expedited correction at 16 Ill. Reg. 11348, effective March 20, 1992; emergency amendment at 16 Ill. Reg. 11947, effective July 10, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 12186, effective July 24, 1992; emergency amendment at 16 Ill. Reg. 13337, effective August 14, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 15109, effective September 21, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 1561, effective September 30, 1992; amended at 16 Ill. Reg. 17302, effective November 2, 1992; emergency amendment at 16 Ill. Reg. 18097, effective November 17, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 19146, effective December 1, 1992; amended at 16 Ill. Reg. 19879, effective December 7, 1992; amended at 17 Ill. Reg. 837, effective January 11, 1993; amended at 17 Ill. Reg. 1112, effective January 15, 1993; amended at 17 Ill. Reg. 2290, effective February 15, 1993; amended at 17 Ill. Reg. 2981, effective February 17, 1993; amended at 17 Ill. Reg. 3421, effective February 19, 1993; amended at 17 Ill. Reg. 6196, effective April 5, 1993; amended at 17 Ill. Reg. 6839, effective April 21, 1993; amended at 17 Ill. Reg. 7004, effective May 17, 1993; expedited correction at 17 Ill. Reg. 7078, effective December 1, 1992; emergency amendment at 17 Ill. Reg. 11201, effective July 1, 1993, for a maximum of 150 days; emergency amendment at 17 Ill. Reg. 15162, effective September 2, 1993, for a maximum of 150 days; emergency amendment at 17 Ill. Reg. 18152, effective October 1, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 18571, effective October 8, 1993; emergency amendment at 17 Ill. Reg. 18611, effective October 1, 1993, for a maximum of 150 days; emergency amendment suspended effective October 12, 1993; amended at 17 Ill. Reg. 20999, effective November 24, 1993; emergency amendment

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repealed at 17 Ill. Reg. 22583, effective December 20, 1993; amended at 18 Ill. Reg. 3620, effective February 28, 1994; amended at 18 Ill. Reg. 4250, effective March 4, 1994; amended at 18 Ill. Reg. 5951, effective April 1, 1994; emergency amendment at 18 Ill. Reg. 10922, effective July 1, 1994, for a maximum of 150 days; amended at 18 Ill. Reg. 11244, effective July 1, 1994; amended at 18 Ill. Reg. 14126, effective August 29, 1994; amended at 18 Ill. Reg. 16675, effective November 1, 1994; amended at 18 Ill. Reg. 18059, effective December 19, 1994; amended at 19 Ill. Reg. 1982, effective January 20, 1995; amended at 19 Ill. Reg. 7919, effective June 5, 1995; amended at 19 Ill. Reg. 2933, effective March 1, 1995; emergency amendment at 19 Ill. Reg. 3523, effective May 1, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 5663, effective April 1, 1995; amended at 19 Ill. Reg. 7919, effective June 5, 1995; emergency amendment at 19 Ill. Reg. \_\_\_\_\_, effective June 9, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_, effective \_\_\_\_\_

## SUBPART A: GENERAL PROVISIONS

Section 140.3 Covered Services Under the Medical Assistance Programs for APDC, APDC-MANG, AABD, AABD-MANG, RRP, Individuals Under Age 18 Not Eligible for APDC, Pregnant Women Who Would Be Eligible if the Child Were Born and Pregnant Women and Children Under Age Eight Who Do Not Qualify as Mandatory Categorically Needy and Disabled Persons Under Age 21 Who May Qualify for Medicaid and in Home Care (Model Waiver)

- a) As described in this Section, the following medical services shall be covered for:
- 1) recipients of financial assistance under the Department's AABD (Aid to the Aged, Blind or Disabled), AFDC (Aid to Families with Dependent Children), or Refugee/Entrant/Repatriate programs;
  - 2) recipients of medical assistance only under the AABD program (AABD-MANG); and
  - 3) recipients of medical assistance only under the AFDC program (AFDC-MANG);
  - 4) individuals under age 18 not eligible for AFDC (see Section 140.7), pregnant women who would be eligible if the child were born and pregnant women and children under age eight who do not qualify as mandatory categorically needy (see Section 140.3);
  - 5) disabled persons under age 21 who may qualify for Medicaid and in-home care (Model Waiver); and
  - 6) recipients eligible under the State Transitional Assistance program who are determined by the Department to be disabled.
- b) The following medical services shall be covered for recipients under age 21 who are included under subsection (a) above:
- 1) Inpatient hospital services;
  - 2) Hospital outpatient and clinic services;
  - 3) Hospital emergency room visits. The visit must be for the alleviation of severe pain or for immediate diagnosis and/or





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\*\*\*AGENCY NOTE:--The--visit--must--be--for--the--alleviation--of--severe--pain--or--for--immediate--diagnosis--and/or--treatment--of--conditions--or--injuries--which--might--result--in--disability--or--death--if--there--is--not--immediate--treatment.  
\*\*\*AGENCY NOTE:--Those--items--necessary--for--life--maintenance--or--to--avoid--life--threatening--situations.  
\*\*\*AGENCY NOTE:--Only--when--essential--for--employment--or--expediting--hospital--discharge.  
\*\*\*AGENCY NOTE:--Only--on--a--prior--approval--basis--when--the--medical--condition--is--documented--by--the--physician--as--terminat

(Source: Amended at 19 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

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1) Heading of the Part:  
Processing, Classification Policies and Review Criteria

2) Code Citation:  
77 Ill. Adm. Code 1110

3) Section Numbers:  
1110.40 Amendments  
1110.230 Amendments  
1110.1430 Amendments  
1110.1730 Amendments  
1110.Appendix B Amendments  
1110.Appendix C Amendments

4) Statutory Authority:

Illinois Health Facilities Planning Act [20 ILCS 3960]

5) A Complete Description of the Subjects and Issues Involved:

Part 1110 contains the Health Facilities Planning Board's certificate of need review criteria and standards. The proposed amendments revise general review criteria in response to deficiencies noted by the Appellate Court, revise general long-term care review criteria eliminating several variances, and revise End Stage Renal Disease (ESRD) category of service review criteria. Specifically, the location, staffing and background of applicant criteria are being revised to correct deficiencies noted by the Appellate Court with respect to data requirements and the use of the term "market studies". Requirements concerning the background of the applicant were rewritten to clarify the types of deficiencies which are serious and to clarify the applicant's relationship or involvement in the operation of other facilities. The ESRD review criteria are being revised to provide a mechanism for reviewing increases in facility capacity which became subject to review on March 1, 1995. The general review criteria are being revised by deleting the accessibility and acute care variances and by clarifying the requirements for the continuum of care and defined population variances. This rulemaking is similar, but not identical to emergency amendments adopted in the June 16, 1995 issue of the Illinois Register.

6) Will this Rulemaking Replace an Emergency Rule Currently in Effect? Yes

Emergency amendments to Sections 1110.230, 1110.1430 and 1110.1730 were adopted with an effective date of May 31, 1995. The proposed amendments to Sections 1110.40, 1110.Appendix A, and 1110.Appendix B are not related to the emergency rulemaking.

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- 7) Does this Rulemaking contain an Automatic Repeal Date? No
- 8) Does this Rulemaking Contain Any Incorporations By Reference? No
- 9) Are there any other Proposed Amendments Pending on this Part? No

10) Statement of Statewide Policy Objectives:

To assure that review criteria utilized by the Board are consistent with statutory intent.

11) Time, Place, and Manner in which Interested Persons May Comment on this Rulemaking:

Interested persons may present their comments concerning these rules by writing to Gail M. Devito, Division of Governmental Affairs, Illinois Department of Public Health, 535 West Jefferson, Fifth Floor, Springfield, Illinois 62761 within 45 days after this issue of the Illinois Register.

These rules may have an impact on small businesses. In accordance with the Illinois Administrative Procedure Act, any small business may present their comments in writing to Gail M. Devito at the above address.

Any small business (as defined in the Illinois Administrative Procedure Act) commenting on these rules shall indicate their status as such, in writing, in their comments.

12) Initial Regulatory Flexibility Analysis:

A) Type of Small Businesses Affected:

Health care facilities that meet the definition of small businesses.

B) Reporting, Bookkeeping or Other Procedures Required for Compliance:

None.

C) Types of Professional Skills Necessary for Compliance:

None.

13) This rulemaking was not included in either of the two most recent regulatory agendas because:

Due to a recent court decision, it became necessary to revise several rules (general review criteria) to assure that data requirements contained in certificate of need applications are consistent with review criteria. Other changes to ESRD and general long-term care category of service review

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criteria are necessary due to recent amendments to other Board rules and to the concern with unanticipated overdevelopment of long-term care facilities.

The full text of the Proposed Amendments begins on the next page:



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TITLE 77: PUBLIC HEALTH  
CHAPTER II: DEPARTMENT OF PUBLIC HEALTH/HEALTH FACILITIES  
PLANNING BOARD

## SUBCHAPTER a: ILLINOIS HEALTH CARE FACILITIES PLAN

## PART 1110

## PROCESSING, CLASSIFICATION POLICIES AND REVIEW CRITERIA

## SUBPART A: GENERAL APPLICABILITY AND PROJECT CLASSIFICATION

Section	
1110.10	Introduction to Part 1110
1110.20	Projects Required to Obtain a Permit (Repealed)
1110.30	Processing and Reviewing Applications
1110.40	Classification of Projects
1110.50	Recognition of Services Which Existed Prior to Permit Requirements
1110.55	Recognition of Non-Hospital Based Ambulatory Surgery Category of Service
1110.60	Master Design Projects

## SUBPART B: REVIEW CRITERIA--DISCONTINUATION

Section	
1110.110	Introduction
1110.120	Discontinuation--Definition
1110.130	Discontinuation--Review Criteria

## SUBPART C: GENERAL REVIEW CRITERIA APPLICABLE TO ALL PROJECTS OTHER THAN DISCONTINUATION

Section	
1110.210	Introduction
1110.220	Definitions--General Review Criteria
1110.230	General Review Criteria
1110.235	Additional General Review Criteria
1110.240	Mergers, Consolidations and Acquisitions

SUBPART D: REVIEW CRITERIA RELATING TO ALL PROJECTS INVOLVING  
ESTABLISHMENT OF ADDITIONAL BEDS OR SUBSTANTIAL CHANGE  
IN BED CAPACITY

Section	
1110.310	Introduction
1110.320	Bed Related Review Criteria

## SUBPART E: MODERNIZATION REVIEW CRITERIA

Section	
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1110.410	Introduction
1110.420	Modernization Review Criteria

SUBPART F: CATEGORY OF SERVICE REVIEW CRITERIA--  
MEDICAL/SURGICAL, OBSTETRIC, PEDIATRIC AND INTENSIVE CARE

Section	
1110.510	Introduction
1110.520	Medical/Surgical, Obstetric, Pediatric and Intensive Care--Definitions
1110.530	Medical/Surgical, Obstetric, Pediatric and Intensive Care--Review Criteria

SUBPART G: CATEGORY OF SERVICE REVIEW CRITERIA--  
COMPREHENSIVE PHYSICAL REHABILITATION

Section	
1110.610	Introduction
1110.620	Comprehensive Physical Rehabilitation--Definitions
1110.630	Comprehensive Physical Rehabilitation--Review Criteria

SUBPART H: CATEGORY OF SERVICE REVIEW CRITERIA--ACUTE  
MENTAL ILLNESS

Section	
1110.710	Introduction
1110.720	Acute Mental Illness--Definitions
1110.730	Acute Mental Illness--Review Criteria

## SUBPART I: CATEGORY OF SERVICE REVIEW CRITERIA--SUBSTANCE ABUSE

Section	
1110.810	Introduction
1110.820	Substance Abuse--Definitions
1110.830	Substance Abuse--Review Criteria

SUBPART J: CATEGORY OF SERVICE REVIEW CRITERIA--  
NEONATAL INTENSIVE CARE

Section	
1110.910	Introduction
1110.920	Neonatal Intensive Care--Definitions
1110.930	Neonatal Intensive Care--Review Criteria

## SUBPART K: CATEGORY OF SERVICE REVIEW CRITERIA--BURN TREATMENT

Section	
1110.1010	Introduction

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1110.1020 Burn--Definitions  
1110.1030 Burn Treatment--Review Criteria

SUBPART L: CATEGORY OF SERVICE REVIEW CRITERIA--  
THERAPEUTIC RADIOLOGY

Section  
1110.1110 Introduction  
1110.1120 Therapeutic Radiology--Definitions  
1110.1130 Therapeutic Radiology--Review Criteria

SUBPART M: CATEGORY OF SERVICE REVIEW CRITERIA--  
OPEN HEART SURGERY

Section  
1110.1210 Introduction  
1110.1220 Open Heart Surgery--Definitions  
1110.1230 Open Heart Surgery--Review Criteria

SUBPART N: CATEGORY OF SERVICE REVIEW CRITERIA--CARDIAC  
CATHETERIZATION

Section  
1110.1310 Introduction  
1110.1320 Cardiac Catheterization--Definitions  
1110.1330 Cardiac Catheterization--Review Criteria

## SUBPART O: CATEGORY OF SERVICE REVIEW CRITERIA--CHRONIC RENAL DIALYSIS

Section  
1110.1410 Introduction  
1110.1420 Chronic Renal Dialysis--Definitions  
1110.1430 Chronic Renal Dialysis--Review Criteria

SUBPART P: CATEGORY OF SERVICE REVIEW CRITERIA--NON-HOSPITAL  
BASED AMBULATORY SURGERY

Section  
1110.1510 Introduction  
1110.1520 Non-Hospital Based Ambulatory Surgery--Definitions  
1110.1530 Non-Hospital Based Ambulatory Surgery--Projects Not Subject to This Part  
1110.1540 Non-Hospital Based Ambulatory Surgery--Review Criteria

## SUBPART Q: CATEGORY OF SERVICE REVIEW CRITERIA--COMPUTER SYSTEMS

Section  
1110.1610 Introduction (Repealed)

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1110.1620 Computer Systems--Definitions (Repealed)  
1110.1630 Computer Systems--Review Criteria (Repealed)

SUBPART R: CATEGORY OF SERVICE REVIEW CRITERIA--GENERAL  
LONG-TERM CARE

Section  
1110.1710 Introduction  
1110.1720 General Long-Term Care--Definitions  
1110.1730 General Long-Term Care--Review Criteria

SUBPART S: CATEGORY OF SERVICE REVIEW CRITERIA--SPECIALIZED  
LONG-TERM CARE

Section  
1110.1810 Introduction  
1110.1820 Specialized Long-Term Care--Definitions  
1110.1830 Specialized Long-Term Care--Review Criteria

SUBPART T: CATEGORY OF SERVICE REVIEW CRITERIA--  
MAGNETIC RESONANCE

Section  
1110.1910 Introduction  
1110.1920 Magnetic Resonance--Definitions  
1110.1930 Magnetic Resonance--Review Criteria

SUBPART U: CATEGORY OF SERVICE REVIEW CRITERIA--HIGH LINEAR  
ENERGY TRANSFER (L.E.T.)

Section  
1110.2010 Introduction  
1110.2020 High Linear Energy Transfer (L.E.T.)--Definitions  
1110.2030 High Linear Energy Transfer (L.E.T.)--Review Criteria

SUBPART V: CATEGORY OF SERVICE REVIEW CRITERIA--POSITRON  
EMISSION TOMOGRAPHIC SCANNING (P.E.T.)

Section  
1110.2110 Introduction  
1110.2120 Positron Emission Tomographic Scanning (P.E.T.)--Definitions  
1110.2130 Positron Emission Tomographic Scanning (P.E.T.)--Review Criteria

SUBPART W: CATEGORY OF SERVICE REVIEW CRITERIA--EXTRACORPOREAL  
SHOCK WAVE LITHOTRIPSY

Section  
1110.2210 Introduction



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1110.2220 Extracorporeal Shock Wave Lithotripsy--Definitions  
 1110.2230 Extracorporeal Shock Wave Lithotripsy--Review Criteria

## SUBPART X: CATEGORY OF SERVICE REVIEW CRITERIA--SELECTED ORGAN TRANSPLANTATION

Section  
 1110.2310 Introduction  
 1110.2320 Selected Organ Transplantation--Definitions  
 1110.2330 Selected Organ Transplantation--Review Criteria

## SUBPART Y: CATEGORY OF SERVICE REVIEW CRITERIA--KIDNEY TRANSPLANTATION

Section  
 1110.2410 Introduction  
 1110.2420 Kidney Transplantation--Definitions  
 1110.2430 Kidney Transplantation--Review Criteria

## SUBPART Z: CATEGORY OF SERVICE REVIEW CRITERIA--SUBACUTE CARE HOSPITAL MODEL

Section  
 1110.2510 Introduction  
 1110.2520 Subacute Care Hospital Model--Definitions  
 1110.2530 Subacute Care Hospital Model--Review Criteria  
 1110.2540 Subacute Care Hospital Model--State Board Review  
 1110.2550 Subacute Care Hospital Model--Project Completion

## SUBPART AA: CATEGORY OF SERVICE REVIEW CRITERIA--POSTSURGICAL RECOVERY CARE CENTER ALTERNATIVE HEALTH CARE MODEL

Section	1110.2610	Introduction	Care Center	Alternative Health Care
1110.2620	Postsurgical Recovery Model--Definitions	Care Center	Alternative Health Care	
1110.2630	Postsurgical Recovery Model--Review Criteria	Care Center	Alternative Health Care	
1110.2640	Postsurgical Recovery Model--State Board Review	Care Center	Alternative Health Care	
1110.2650	Postsurgical Recovery Model--Project Completion	Care Center	Alternative Health Care	

APPENDIX A Medical Specialty Eligibility/Certification Boards  
 APPENDIX B State and National Norms on Square Footage by Department  
 APPENDIX C Statutory Citations for All State and Federal Laws and Regulations Referenced in Chapter 1110

AUTHORITY: Implementing and authorized by the Illinois Health Facilities

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Planning Act (20 ILCS 3960)

SOURCE: Fourth Edition adopted at 3 Ill. Reg. 30, p. 194, effective July 28, 1979; amended at 4 Ill. Reg. 4, p. 129, effective January 11, 1980; amended at 5 Ill. Reg. 4895, effective April 22, 1981; amended at 5 Ill. Reg. 10297, effective September 30, 1981; amended at 6 Ill. Reg. 3079, effective March 8, 1982; emergency amendments at 6 Ill. Reg. 6895, effective May 20, 1982, for a maximum of 150 days; amended at 6 Ill. Reg. 11574, effective September 9, 1982; Fifth Edition adopted at 7 Ill. Reg. 5441, effective April 15, 1983; amended at 8 Ill. Reg. 1633, effective January 31, 1984; codified at 8 Ill. Reg. 18498; amended at 9 Ill. Reg. 3734, effective March 6, 1985; amended at 11 Ill. Reg. 7333, effective April 1, 1987; amended at 12 Ill. Reg. 16099, effective September 21, 1988; amended at 13 Ill. Reg. 16078, effective September 29, 1989; emergency amendments at 16 Ill. Reg. 13159, effective August 4, 1992, for a maximum of 150 days; emergency expired January 1, 1993; amended at 16 Ill. Reg. 16108, effective October 2, 1992; amended at 17 Ill. Reg. 4453, effective March 24, 1993; amended at 18 Ill. Reg. 2993, effective February 10, 1994; amended at 18 Ill. Reg. 8455, effective July 1, 1994; amended at 19 Ill. Reg. 2991, effective March 1, 1995; emergency amendments at 19 Ill. Reg. 7981, effective May 31, 1995 for a maximum of 150 days; amended at 19 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_.

## SUBPART A: GENERAL APPLICABILITY AND PROJECT CLASSIFICATION

## Section 1110.40 Classification of Projects

When an application for permit has been received by the State Board, the Executive Secretary shall classify the project into one of the following classifications:

- a) Emergency Classification
  - 1) Emergency projects are subject to the review process and are those construction or modification projects which are necessary because there exists one or more of the following conditions:
    - A) An imminent threat to the structural integrity of the building; or
    - B) An imminent threat to the safe operation and functioning of the mechanical, electrical, or comparable systems of the building.
  - 2) Since the State Board recognizes that applications for emergency projects must be processed as expeditiously as possible, all applications will be reviewed in accordance with the following review criteria:
    - A) the project is indeed an emergency project as defined in subsections (b)(1)(A) or (B) above; and
    - B) failure to proceed immediately with the project would result in closure or impairment of the inpatient operation of the facility; and
    - C) the emergency conditions did not exist longer than 30 days

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- b) prior to requesting the emergency classification. Non-substantive Review Classification. Non-substantive projects are those establishment, construction, modification or equipment projects which consist solely of the characteristics detailed in this subsection. Applications shall be evaluated only against the review criteria set forth below.

Applicable Project Type	Review Criteria
Establishment of long-term care facilities licensed by the Department of Children and Family Services	Section 1110.230 and Part <del>Parts</del> 11207--1230-- <del>or</del> 1240 <del>as-applicable</del>
Discontinuation of beds or category of service	Section 1110.130 and Part <del>Parts</del> 11207--1230-- <del>or</del> 1240 <del>as-applicable</del>
Developmentally Disabled Categories of Service	Section 1110.230(a), (b), (c), (d), (e), (f), (g); Section 1110.320(b) <del>for</del> ; Section 1110.1830(a), (b), (c), (d), (f), (h), (i), (j); and Part <del>Parts</del> 11207 1230-- <del>or</del> 1240-- <del>as-applicable</del>
Acute Care Beds Certified for Extended Care Category of Service as defined by the Health Care Financing Administration (42 CFR 405.471 (1987))	Section 1110.230(a), (c), (g) and Part <del>Parts</del> 11207 1230-- <del>or</del> 1240-- <del>as-applicable</del>
Chronic Renal Dialysis Category of Service	Section 1110.230(a), (b), (c), (d), (e), (f), (g); Part 1110.1430; and Part <del>Parts</del> 11207--1230-- <del>or</del> 1240 <del>as-applicable</del>
Residential units and apartments	Section 1110.230(a), (b), (c), (d), (e), (f), (g) and Part 11207--1230-- <del>or</del> 1240-- <del>as-applicable</del>
Computers	Section 1110.230(b), (e), (f), (g); Section 1110.420(b); and Part 11207--1230-- <del>or</del> 1240-- <del>as-applicable</del>

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Projects intended solely to provide care to patients suffering from Acquired Immunodeficiency Syndrome (AIDS) or related disorders such as AIDS Related Complex (ARC)	Section 1110.230; Section 1110.420; and Part 11207 1230-- <del>or</del> 1240-- <del>as-applicable</del>
Projects to comply with Life Safety Code requirements	Section 1110.230(e) and (g); Section 1110.420(a) and (b); and Part <del>Parts</del> 11207--1230-- <del>or</del> 1240-- <del>as-applicable</del>
Parking Facilities	Section 1110.230(g), (f) and (e) and Section 1110.420(b), Part 1120
Restaurants, cafeterias, snack bars and all other non-patient dining areas	Section 1110.230(g) and (e); Section 1110.420(b); and Part <del>Parts</del> 11207--1230-- <del>or</del> 1240-- <del>as-applicable</del>
Chapels	Part <del>Parts</del> 11207--1230-- <del>or</del> 1240-- <del>as-applicable</del>
Telephone systems	Part <del>Parts</del> 1120--1230-- <del>or</del> 1240-- <del>as-applicable</del>
Administration and offices	Section 1110.230 (e) and (g) and Part <del>Parts</del> 11207 1230-- <del>or</del> 1240-- <del>as-applicable</del>
Giftshops and newsstands	Part <del>Parts</del> 11207--1230-- <del>or</del> 1240-- <del>as-applicable</del>
Auditoriums, student housing and classrooms	Part <del>Parts</del> 11207--1230-- <del>or</del> 1240-- <del>as-applicable</del>
Modernization of structural components (roof replacement, housing and classrooms, masonry work, etc.)	Section 1110.230(g) and (e); Subpart E; and Part <del>Parts</del> 11207--1230-- <del>or</del> 1240 <del>as-applicable</del>
Boiler repair or replacement (does not include boiler plant)	Section 1110.230 (e) and (g); Section 1110.420(b); and Part <del>Parts</del> 11207--1230-- <del>or</del> 1240-- <del>as-applicable</del>



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Replacement of equipment with comparable equipment to be utilized for a similar purpose

Section 1110.230 (e) and (g); Section 1110.420(b); and Part Parts 11207--1230--or-1240-as-applicable

Loading docks

Part Parts 11207--1230--or-1240-as-applicable

Capitalized projects which are considered basically maintenance such as carpeting, tile replacement or furniture purchase

Section 1110.230 (g); Section 1110.420(b); and Part Parts 11207--1230--or-1240-as-applicable

Emergency transportation equipment

Part Parts 11207--1230--or-1240-as-applicable

Air conditioning

Part Parts 11207--1230--or-1240-as-applicable

Bridges, tunnels, walkways, elevators or any structure designed to provide access between or through existing buildings

Part Parts 11207--1230--or-1240-as-applicable

c) Substantive Review Classification. All projects that do not include components specified in subsection (b) shall be subject to review and shall be classified substantive unless they are found to be emergency projects as delineated in subsection (a) above.

d) Classification of projects with both non-substantive and substantive components. Projects which include both substantive and non-substantive components shall be classified as substantive.

e) Classification Appeal. Appeal of any classification may be made to the State Board at the next scheduled State Board meeting.

(Source: Amended at 19 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

## SUBPART C: GENERAL REVIEW CRITERIA APPLICABLE TO ALL PROJECTS OTHER THAN DISCONTINUATION

## Section 1110.230 General Review Criteria

a) Location--Review Criterion

1) The applicant must document that the primary purpose of the proposed project will be to provide care to the residents of the planning area in which the proposed project will be physically located. Documentation for existing facilities shall include patient origin information for all admissions for the last 12 months. Patient origin information must be presented by zip code

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and be based upon the patient's legal residence other than a health care facility for the last six months immediately prior to admission. For all other projects for which referrals are required to support the project, patient origin information for the referrals is required. Each referral letter must contain a certification that the representations contained therein are true and correct. A complete set of the referral letters with original notarized signatures must accompany the application for permit. ~~shall consist of market studies of the area indicating the characteristics of the population to be served.~~

2) The applicant must document that the location selected for a proposed project will not create a maldistribution of beds and services ~~within the planning area~~. Maldistribution is typified by such factors as: a ratio of beds to population (population will be based upon the most recent census data by zip code), within 30 minutes travel time of the proposed facility, which exceeds one and one half times the State average; an average utilization rate for the last 12 months for the facilities providing the proposed service(s) within 30 minutes travel time of the proposed project which is below the Board's target occupancy rate; or the lack of a sufficient population concentration in an area to support the proposed project. ~~excessive travel time to reach services; unusual patient migration patterns; and excessive physical distance to alternative providers. Documentation shall consist of location and travel times to other providers; population concentrations within the planning area; and proposed market for service.~~

b) Ancillary and Supporting Services--Review Criterion. The applicant must document that the scope and size of all ancillary and support services related to the proposed project comply with the Agency's licensure requirements. Documentation shall consist of a summary of all ancillary and support services and a comparison of existing size or proposed size to licensure requirements.

c) Staffing--Review Criterion

1) All applicants must document that that the supply of manpower currently available in the area is sufficient to meet the health service needs in that area. Documentation should include, but is not limited to, letters from employment services in the area indicating the number of potential health care employees on their rolls, letters from local health departments, in whose jurisdiction the applicant is located, indicating the availability of licensed personnel in the planning area, actual applications for employment on file with the applicant, and surveys performed by persons other than the applicant regarding the availability of manpower. ~~Documentation should include--but is not limited to--letters of verification from other health facilities and organizations in the area--including any surveys done by such facilities--and organizations--on manpower.~~

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availability, and

- 2) Any applicant proposing a Long-Term Care Category of Service must document:

A) An adequate supply of health manpower exists within the planning area. Documentation shall consist of evidence that less than 30% of area facilities have been cited for staffing deficiencies by the Department of Public Health in its licensure inspections over the last two-year period, and that the required staffing levels under applicable licensure and Federal Medicare and Medicaid title XVIII Title XIX certification regulations will be met.

- d) Background of Applicant--Review Criterion. When the applicant or proposed operator of the proposed project are operating or have operated health care facilities previously, the applicant must document compliance with licensure requirements. Documentation must show an absence of two or more serious violations in each facility operated during the last five years. Serious violation means a type A or type B violation pursuant to 77 Ill. Adm. Code 300.330, 350, or 390, in a long-term care facility licensed by the Department, in other facilities serious violation means an action taken to repeat licensure or certification. Each history of operation must contain citations for operational deficiencies, any suspension or termination action, any contested licensure action and the outcome of all such actions.

1) The applicant shall demonstrate that it is fit, willing and able, and has the qualifications, background and character to adequately provide a proper standard of health care service for the community. The application must document that no adverse action has been taken against the applicant, or against any health care facility owned or operated by the applicant, directly or indirectly, within three years preceding the filing of the application.

- 2) For purposes of this subsection:

A) "Adverse action" means any final action by any governmental agency or nationally recognized accrediting body which is adverse to the applicant or to the health care facility. Adverse actions include, but are not limited to, any criminal conviction; any supervision, probation, suspension, revocation, termination, or denial of a license or certificate of registration; imposition of a conditional license; termination or suspension from participation in any program involving payment authorized under Title XVIII (Medicare) or Title XIX (Medicaid) of the Social Security Act, as amended; or denial, suspension, revocation or termination of accreditation by any nationally recognized organization.

B) A health care facility is considered "owned or operated" by every person or entity which, within the three years

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preceding the filing of the application, owns, directly or indirectly, an ownership interest as specified in this subsection.

C) "Ownership interest" means any legal or equitable interest, including any interest arising from a lease or management agreement, which gives rise to participation in profits or losses, or which gives rise to the exercise of implementation of any decision-making authority respecting the operations or finances of the health care facility.

i) In the case of an individual, "ownership interest" includes any interest owned or exercised, directly or indirectly, by or for the individual's spouse or children.

ii) In the case of a partnership, "ownership interest" includes any interest owned or exercised, directly or indirectly, by or for any general partner, and the partnership is considered to be owned by all of its general partners.

iii) In the case of a limited liability company, "ownership interest" includes any interest owned, directly or indirectly, by or for any member or partner, and the limited liability company is considered to be owned by all of its members or partners.

iv) In the case of an estate, "ownership interest" includes any interest owned or exercised, directly or indirectly, by any beneficiary, and the estate is considered to be owned by all of its beneficiaries.

v) In the case of a trust, "ownership interest" includes any interest owned or exercised, directly or indirectly, by any beneficiary, and the trust is considered to be owned by all of its beneficiaries.

vi) In the case of a corporation, "ownership interest" includes any interest owned, directly or indirectly, by or for any principal shareholder, member, director or officer, and the corporation is considered to be owned by its principal shareholders, members, directors and officers.

D) "Principal shareholder" means

i) In the case of a corporation having 30 or more shareholders, a person who, directly or indirectly, beneficially owns, holds or has the power to vote 5% or more of any class of securities issued by the corporation.

ii) In the case of a corporation having fewer than 30 shareholders, a person who, directly or indirectly, beneficially owns, holds or has the power to vote 50% or more of any class of securities issued by the corporation, or any member of any group of five or



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fewer shareholders which, directly or indirectly, beneficially own, hold or have the power to vote 80% or more of any class of securities issued by the corporation.

- E) If any person or entity owns any option to acquire stock, such stock shall be considered to be owned by such person or entity.

## 3) Examples of facilities owned or operated by the applicant:

- A) The applicant, Partnership ABC, owns 60 percent of the shares of Corporation XYZ which manages the Good Care Nursing Home under a management agreement. The applicant, Partnership ABC, owns or operates Good Care Nursing Home.
- B) The applicant, Healthy Hospital, a corporation, is a subsidiary of Universal Health, the parent corporation of Healthcare ASTC, its wholly-owned subsidiary. The applicant, Healthy Hospital, owns and operates Healthcare ASTC.

- C) Dr. Wellcare is the applicant. His wife is the director of a corporation which owns a hospital. The applicant, Dr. Wellcare, owns or operates the hospital.

- D) Drs. Faith, Hope and Charity own 40%, 35%, and 10%, respectively, of the shares of Healthcare, Inc., a corporation, which is the applicant. Dr. Charity owns 45% and Drs. Well and Care each own 25% of the shares of XYZ Nursing Home, Inc. The applicant, Healthcare, Inc., owns and operates XYZ Nursing Home, Inc.

## 4) Documentation to be submitted shall include:

- A) A listing of all health care facilities owned or operated by the applicant, including licensing, certification, and accreditation identification numbers, if applicable;
- B) proof of current licensure and, if applicable, certification and accreditation of all health care facilities owned or operated by the applicant;
- C) a certification from the applicant listing any adverse action taken against any facility owned or operated by the applicant during the three (3) years prior to the filing of the application.

- D) authorizations permitting the State Board and Agency access to information in order to verify any documentation or information submitted in response to the requirements of this subsection or to obtain any additional documentation or information which the State Board or Agency finds pertinent to this subsection. Failure to provide such authorization shall constitute an abandonment or withdrawal of the application without any further action by the State Board.

- 5) In addition to documentation submitted by the applicant, the State Board and Agency shall review the official records of the State Agency, other State agencies, and, where applicable, those

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of other states, respecting licensure and certification, and shall review the records of nationally recognized accreditation organizations to determine compliance with the requirements of this subsection.

- e) Alternatives to the Proposed Project--Review Criterion. The applicant must document that the proposed project is the most effective or least costly alternative. Documentation shall consist of a comparison of the proposed project to alternative options. Such a comparison must address issues of cost, patient access and financial benefits in both the short and long-term. Alternatives must include, but are not limited to: purchase of equipment, leasing or utilization (by contract or agreement) of other facilities, development of freestanding settings for service and alternate settings within the facility.

- f) Need For the Project--Review Criterion. The project must be needed.

- 1) If the State Board has determined need pursuant to Part 1100, the proposed project shall not exceed additional need determined unless the applicant meets the criterion for a variance.

- 2) If the State Board has not determined need pursuant to Part 1100, the applicant must document that it will serve a population group in need of the services proposed and that insufficient service exists to meet the need. Documentation shall include but not be limited to:

- A) area market-studies (which evaluate population trends and service use factors);
- B) calculation of need based upon models of estimating need for the service (all assumptions of the model and mathematical calculations must be included);

- C) historical high utilization of other area providers; and

- D) identification of individuals likely to use the project.

- g) Size of Project--Review Criterion. The applicant must document that the size of a proposed project is appropriate.

- 1) The proposed project cannot exceed the norms for project size found in Appendix B of this Part unless the additional square footage beyond the norm can be justified by one of the following:

- A) the proposed project requires additional space due to the scope of services provided;

- B) the proposed project involves an existing facility where the facility design places impediments on the architectural design of the proposed project;

- C) the proposed project involves the conversion of existing bed space and the excess square footage results from that conversion; or

- D) the proposed project includes the addition of beds and the historical demand over the last five year period for private rooms has generated a need for conversion of multiple bed rooms to private usage.

- 2) When the State Board has established utilization targets for the

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beds or services proposed, the applicant must document that in the second year of operation the annual utilization of the beds or service will meet or exceed the target utilization. Documentation shall include, but not be limited to, historical utilization trends, population growth, expansion of professional staff or programs (demonstrated by signed contracts with additional physicians) and the provision of new procedures which would increase utilization.

## h) Medical Education--Review Criterion

1) If the project proposed is designed to meet the health education or related research needs of the facility, the applicant must document the following:

- A) the proposed project would assist the facility in meeting its research or educational needs for related residency programs. Documentation must indicate that accreditation would be lost without the proposed project and that current space is insufficient to meet projected teaching needs;
  - B) the proposed project will not have an adverse impact on community facilities within the planning area and that such community facilities support the project. Documentation shall consist of letters from non-teaching community hospitals in the planning area indicating support for the project or indicating that the proposal will have no adverse impact on the utilization of their services;
  - C) how the proposed project compares in function and design to similar programs in other teaching hospitals in Illinois and nationally. Documentation shall consist of detailed comparisons of volume requirements and square footage needs in similar institutions both in Illinois and nationally; and
  - D) the facility is unable to meet its teaching or related research needs through the use of existing resources. Documentation shall consist of: statements concerning the inability to utilize vacant or under utilized areas of the applicant facility; and statements detailing any prohibitive reasons for not utilizing space in other facilities to provide the proposed project.
- 2) This criterion shall not be the sole basis for approval of a project and cannot be used to justify the creation of a new health care facility.

(Source: Amended at 19 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

SUBPART O: CATEGORY OF SERVICE REVIEW CRITERIA -- END STAGE RENAL DISEASE

## Section 110.1430 Chronic Renal Dialysis - Review Criteria

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- a) Data System - Review Criterion. The applicant must document that a chronic renal dialysis data system exists or will be established.
- b) Minimum Size of Renal Dialysis Center or Renal Dialysis Facilities - Review Criterion. The minimum facility size is:
  - 1) three dialysis stations within the facility in areas not included in an MSA or in an MSA of less than 500,000 people;
  - 2) six dialysis stations in MSA's of over 500,000 population.
- c) Access Variance to Need--Review Criterion
  - 1) The applicant must document that access to the proposed service is restricted in the planning area as documented by:
    - A) all existing renal dialysis facilities are operating at full utilization as reflected in three patient shifts per day; or
    - B) renal dialysis facilities are not available to 90 percent of the population of the planning area within 45 minutes travel time and the proposed project will meet that need.
  - 2) Documentation shall consist of location and historical utilization of other planning area service providers; patient location information, all applicable time-travel studies and a certification of waiting times or scheduling problems in existing facilities.
  - 3) The applicant must also document that the number of patients who are experiencing an access problem will justify the proposed project at the minimum utilization level detailed in 77 Ill. Adm. Code 1100.
- d) Establishment of Facilities--Review Criterion. It is the policy of the State Board that no new renal dialysis center or facility be established in a planning area unless:
  - 1) All existing renal dialysis centers or facilities within the planning area are operating at or above the minimum utilization for such facilities as detailed in 77 Ill. Adm. Code 1100.630; and ~~or~~
  - 2) There is a calculated need for additional stations in the planning area. ~~The planning area is currently underserved by existing renal dialysis centers or facilities as demonstrated by a calculated need for additional stations. The need for treatment stations will be based upon the need figures shown in the update to the Inventory of Health Care Facilities in effect at the time of State Board consideration; and can be estimated utilizing the formula reflected in 77 Ill. Adm. Code 1100.630 for the determination of station need.~~
- 3) the applicant documents that the proposed new facility will improve access to care by demonstrating that services are not available within 30 minutes travel time of the proposed facility; ~~or~~
- 4) the applicant documents conformance with the variance detailed in subsection (c) of this Section.
- e) Location - Review Criterion. The applicant must document that the location of the proposed project is accessible. Documentation shall



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consist of a narrative relating the proposed location to public transportation, other providers and to the population to be served. It also must include floor plans of the facility, and the protocols for evacuation of the residents in an emergency such as a fire.

f) Support Services - Review Criterion. The applicant must document that clinical and pathological laboratory services, blood bank, nutrition, rehabilitation, psychiatric and social services, and self-care dialysis support services, will be available. Documentation shall consist of a narrative as to how such services will be provided.

g) Affiliation Agreements - Review Criterion. The applicant must document that a written affiliation agreement or arrangement is in effect for the provision of inpatient care and other hospital services. Documentation shall consist of copies of all such agreements.

h) Self-Care and Home Dialysis Training--Review Criterion. The applicant must document that self-care dialysis, self-care instruction, home dialysis and home training will be provided at the applicant facility or that a written agreement with another facility for the provision of these services exists. Documentation shall consist of a certification that services are provided by the applicant or copies of all agreements for provision of such services.

i) Relocation of Facilities--Review Criterion. This criterion may only be used to justify the relocation of a facility from one location in the planning area to another in the same planning area and may not be used to justify any additional stations. Compliance with this review criterion eliminates the need to address the review criteria in subsections (c) and (d) of this Section. The applicant must document the following:

- 1) that the existing facility has met the occupancy targets detailed in 77 Ill. Adm. Code 1100.630 for each of the last 12 months;
- 2) that the proposed facility will improve access for care to the existing patient population; and
- 3) that the existing facility needs to be replaced, as documented by the applicant, in order to comply with Section 1110.420(b).

j) Addition of Stations--Review Criterion. This criterion applies to an existing facility which proposes the addition of stations at the existing site. The applicant must document the following:

- 1) that the existing facility has met the occupancy targets set forth in 77 Ill. Adm. Code 1100.630 for each of the last 12 months; and
- 2) that there are sufficient additional patients in need of the service to insure that the facility will meet the occupancy targets set forth in 77 Ill. Adm. Code 1100.630 for each of the last 12 months; and by the end of the first full year of operation; and
- 3) that the proposed project will not adversely impact the workload at any other existing facility within 30 minutes travel time of the applicant facility; and

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4) that a need for additional stations exists in the planning area based upon the update to the Inventory of Health Care Facilities in effect at the time of State Board consideration; or that the proposed project is in conformance with the access variance set forth in subsection (c) of this Section.

(Source: Amended at 19 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

SUBPART R: CATEGORY OF SERVICE REVIEW CRITERIA--  
GENERAL LONG-TERM CARE

## Section 1110.1730 General Long-Term Care--Review Criteria

a) Facility Size -- Review Criterion. The maximum size of a general long-term care facility is 250 beds, unless the applicant documents that a larger facility would provide personalization of patient care and documents provision of quality care based on the experience of the applicant and compliance with the Agency's licensure standards (77 Ill. Adm. Code: Chapter I, Subchapter c) (Long-Term Care Facilities) over a 2 year period of time.

b) Community Related Functions -- Review Criterion. The applicant must document cooperation with and the receipt of the endorsement of community groups in the town or municipality where the facility is or is proposed to be located, such as, but not limited to, social, economic or governmental organizations or other concerned parties or groups. Documentation shall consist of copies of all letters of support from such organizations.

c) Zoning--Review Criterion. The applicant must document one of the following:

- 1) the property to be utilized has been zoned for the type of facility to be developed;
  - 2) zoning approval has been received; or
  - 3) a variance in zoning for the project is to be sought.
- d) Variances to Computed Bed Need -- Review Criterion
- 1) Defined Population Variance.

A) The applicant must document that the proposed project will service a defined population group of a religious, fraternal or ethnic nature from throughout the entire health service area or from a larger geographic area (hereinafter referred to as the GA) proposed to be served and which includes, at a minimum, the entire health service area in which the facility is or will be physically located. Documentation shall consist of one of the following:

- i) a description of the proposed religious, fraternal or ethnic group proposed to be served;
- ii) the boundaries of the GA; and
- iii) the population of the defined population group which

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lives within the proposed GA, including the source of the population figures.

B) In addition, the applicant must document each of the following:

- i) the proposed services do not exist in the GA health service area where the facility is or will be located; and
- ii) the services cannot be instituted at existing facilities within the GA health service area in sufficient number to accommodate the group's needs. The applicant must enumerate each specific service the proposed facility will provide which could not be provided in any of the existing facilities in the GA; the basis for determining why such service could not be provided.

C) B) The application must document that the proposed number of beds is needed based upon the target occupancy rate. Documentation shall consist of an identification of the defined population volume; the patient origin of the proposed patients; and a rationale for the utilization projections. Documentation shall consist of verification that the proposed project will achieve, within the first year of operation, an annual occupancy in excess of the target occupancy.

D) E) The applicant must document that at least 85 percent of the residents of the facility who will be seeking the facility's services are members of the defined population group. Documentation shall consist of a written admission policy which insures that the requirements of this subsection will be met, an identification of the defined population volume and location and rationale for utilization projections.

E) B) The applicant must document that the proposed project is either directly owned, sponsored or affiliated with the religious, fraternal or ethnic group that has been defined as the population to be served by the project. The applicant must provide legally-binding documents which prove ownership, sponsorship or affiliation.

B) The applicant must document that the proposed facility will include beds in both the Nursing Category of Service and either the Sheltered Care Category of Service or residential living arrangements which are not licensed by the Agency. Documentation shall consist of a certification of the proposed bed mixture.

## 2) Accessibility Variance

A) The applicant must document that access to the proposed service is restricted in the planning area as documented by the absence of beds within the planning area; or

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- ii) limitations on governmentally-funded or charity patients; or
- iii) restrictive admission policies of existing area providers.

B) Documentation shall consist of location and utilization of other planning area service providers, and a certification of waiting times and scheduling or admission restrictions that exist in area providers.

C) The applicant must also document that the number of beds proposed will not exceed the number needed to meet the health care needs of the population identified as having restricted access at the target occupancy rate.

## 3) Acute-Care Conversion Variance

A) The applicant must document a shortage of long-term-care beds in the planning area or a shortage of Medicare certified beds in the area because:

- i) A Diagnosis-Related Group (DRG)-extended stay caseload exists at the applicant facility that cannot be referred to existing facilities because of a bed shortage; or

ii) a large number of long-term-care patients with medical conditions which require a combination of acute and chronic care receive care at the applicant institution.

B) Documentation shall include a summary of patient diagnosis and condition at the time of long-term care placement; a statement as to the number of patients who have been maintained in the hospital beyond DRG reimbursement limitations (see 42-CPR-223-1990); statements by physicians as to the need to maintain DRG extended-stay patients in a hospital rather than a nursing home setting; and waiting lists in existing skilled long-term-care providers.

E) The applicant must document that the proposed number of beds will achieve, within the first year of operation, an average occupancy of 90 percent.

## 2) Continuum of Care Variance

A) The applicant must document that the project will provide a continuum of care for a geriatric population which includes independent living and/or congregate housing (such as unlicensed apartments, high rises for the elderly, and retirement villages) and related health and social services. Such housing complex must be on the same site as the health facility component of the project. Such a proposal must be for the purposes of and serve only the residents of the housing complex and may be developed in one of the following ways:

- i) The proposal may be developed after the housing



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complex has been established; or  
ii) The proposal may be developed as a part of a total housing construction program, provided that, the entire complex is one inseparable project and that there is a documented demand for the housing and that the licensed beds will not be built first, but will be built concurrently with or after the residential units.

B) The applicant must also document the following:  
i) That the proposed number of beds are needed. Documentation shall consist of a list of available patients/residents needing the proposed project. The proposed number of beds may not exceed one licensed long-term care bed for every five four apartments or independent living units; and  
ii) That the proposed general long-term care facility will include--beds--in both the Nursing Category of Service and the Sheltered Care Category of Service in a ratio not to exceed 2-Nursing-Care-beds-to-every-Sheltered-Care-bed; and

iii) That its written policies of operation provide that if a resident of the retirement community is transferred to the long-term care unit, the resident will not lose his or her apartment unit or be transferred to another long-term care facility solely because of the resident's altered financial status or medical indigency.

(Source: Amended at 19 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

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Section 1110.APPENDIX B State and National Norms on Square Footage by Department

NOTE: Gross square footage is indicated in the list below by "gft(2)".

	Department	State Norms
1. Surgery		2078 2043 gft(2)/Surgical Room
2. Recovery (Surgical)		180 165 gft(2)/Recovery Station or 201-gft(2)-R-
3. Laboratory (includes blood bank)		225 223 gft(2)/Full-Time Equivalent or 36 35 gft(2)/Bed (Total)
4. Morgue		3.0 2-9 gft(2)/Bed (Total)
5. Diagnostic Radiology		1386 1393 /Procedure Room or 5.5 3-4 Procedures/gft(2) or-49 gft(2)/Bed-(Total)
6. Intensive Care Beds		603 557 gft(2)/Bed (ICU)
7. Burn Beds		596 gft(2)/Bed (Burn)
8. Pediatric Beds		420 350 gft(2)/Bed (Ped.)
9. Obstetric Beds		176 396 gft(2)/Bed (OB)
10. Medical-Surgical Beds		101 343 gft(2)/Bed (M-S)
11. Acute Mental Illness Beds		586 469 gft(2)/Bed (Psych)
12. Neonatal-High Risk Beds		355 324 gft(2)/Bed (Neo.)
13. Substance Abuse Beds		166 450 gft(2)/Bed (Alc.)
14. Rehabilitation Beds		588 564 gft(2)/Bed (Rehab)
15. Labor-Delivery-Recovery		23 gft(2)/Bed or 4.6 gft(2)/Procedure or 1975 gft(2)/Needed Delivery Room (BASED upon 750 Live Births/Delivery Room) Delivery/Birthing-Room

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Department	State Norms
16. Food Service	42 24 Meals/gft(2) or 54 52 gft(2)/Bed (Total)
17. Pharmacy	12.0 gft(2)/Bed (Total)
18. <u>LDRP Medical-Records</u>	1,119 gft(2)/Bed 4-3---Total Admissions-gft(2)
19. Storage	33 95 gft(2)/Bed (Total) or-41 Hsp-gft(2)-gft(2)
20. Physical Therapy	7.5 4-9 Treatments/gft(2) or 23 21 gft(2)/Bed (M-S, Peds, Rehab, Burn and LTC)
21. Respiratory Therapy	20.5 Procedures/gft(2) or 8.9 8-8 gft(2)/Bed (Total less Acute Mental Illness)
22. Occupational Therapy	4.3 4-8 gft(2)/Bed (Total less ICU and OB)
23. Nuclear Medicine	2.9 ± Procedures/gft(2) or 1,135 gft(2)/Treatment Room or 11.7 gft(2)/Bed (Total)
24. Housekeeping	15.5 11 gft(2)/Bed (Total) or 129-Hosp-gft(2)-gft(2)
25. Central Sterile Supply	18 gft(2)/Bed (Total)
26. Radiation Therapy	28-gft(2)-Bed--(Total)-or-1-1 2.7 treatments/gft(2)
27. Cardiac Catheterization	1596 1-709 gft(2)/Laboratory
28. Ambulatory Care	4.1 5-4 Clinic Visits/gft(2) or 667 606gft(2)/Treatment Room
29. <u>MRI Cardio-Pulmonary-Service</u>	3,400 gsf(2)/unit 19-5 gft(2)/Bed-(Total- less-Psych)
30. Newborn Nursery	152 gft(2)/Bed (Obstetrics) or
31. Social Services	4.5 4-3 gft(2)/Bed (Total)

## DEPARTMENT OF PUBLIC HEALTH/HEALTH FACILITIES PLANNING BOARD

## NOTICE OF PROPOSED AMENDMENTS

Department	State Norms
32. Maintenance	12.9 13 gft(2)/Bed (Total)
33. Cafeteria	18 gft(2)/Bed (Total) or 34 meals/gft(2)
34. Laundry	22 gft(2)/Bed (Total) or-228 158-79gft(2)
35. Emergency Room	744.6 706 gft(2)/Treatment Room 3.1 Visits gft(2)
36. Ambulatory Surgical Treatment Centers	2,750 2-588 gft(2)/Treatment Room or-18-418-57gft(2)
37. Hemodialysis	2,470 2-469 gft(2)/Room
38. Admitting	12.9 11-7 gft(2)/Bed (Total)
39. Speech Pathology/Audiology	1.8 gft(2)/Bed (Total)
40. Conversion of Hosp. Acute Care Beds to Skilled Care	429 369 gft(2)/Bed (Total)
41- ERG	7-6-gft(2)-Bed-(Total)
41. 42-In-service Education	17.0 14-2 gft(2)/Bed (Total)
42. 43-ICF/DD Facilities - 16 ±5 Beds or Less	369 287 gft(2)/Bed (Total)
43. 44-ICF/DD Facilities (Over 16 ±5 Beds)	564 482 gft(2)/Bed (Total)
44. 45-New LTC Facilities	414 388-5 gft(2)/Bed (Total)

\*Surgical visits and obstetric procedures.

## Recognized National Norms:

Publications which are utilized in the comparison of a project's proposed square footage are as follows:

- Administration and Employee Facilities
  - E. Todd Wheeler, "Hospital Modernization and Expansion," McGraw-Hill Book Company, New York, 1971.
  - David Porter, "Health Design Administration," George Washington University, School of Health, Washington D.C., 1973.
- Laboratory
  - Arthur Rappport, "Laboratory Design," Laboratory Medicine, Vol. 4,



## DEPARTMENT OF PUBLIC HEALTH/HEALTH FACILITIES PLANNING BOARD

## NOTICE OF PROPOSED AMENDMENTS

- Chapter 26, Hagerstown, Md., 1977.
3. Ambulatory Care  
Chi Systems, "Evaluation and Space Programming Methodology Series, 4 Outpatient/Ambulatory Care," Published by Authority of the Minister of National Health and Welfare, Canada, 1978.
4. Parking  
The School of Community and Regional Planning, "Access and Parking Criteria for Hospitals," Transportation Research Series NO. 12, University of British Columbia, Vancouver, Canada, 1970.
5. Admitting  
Chi Systems, "Evaluation and Space Programming Methodology Series, 13 Admitting," Published by Authority of the Minister of National Health and Welfare, Canada, 1979.
6. Administration  
Chi Systems, "Evaluation and Space Programming Methodology Series, 14 Administration," Published by Authority of the Minister of National Health and Welfare, Canada, 1979.
7. Speech Pathology, Audiology and Occupational Therapy  
Chi Systems, "Evaluation and Space Programming Methodology Series, 6 Physiotherapy, Occupational Therapy, Speech Pathology, and Audiology Departments," Published by Authority of the Minister of National Health and Welfare, Canada, 1978.
8. Acute Inpatient Beds  
"Hospital Licensing Act" (1987, Rev. Stat. 1987, Ch. 111-1/27, Par. 1-142 et seq.) [210 ILCS 85]
9. Long-Term Care Beds  
"Nursing Home Care Reform Act of 1979" (1979, Rev. Stat. 1987, Ch. 111-1/27, Par. 1-151 et seq.) [210 ILCS 45]
10. Perinatal Beds  
Directory of Residency Training Programs (1988) American Medical Association, 535 Dearborn, Chicago, Illinois 60610.
11. All citations to federal requirements in this Part concern the specified regulations in the 1988 Code of Federal Regulations, unless another date is specified.
12. All incorporations by reference of federal regulations or standards and the standards of the nationally recognized organizations refer to the regulations and standards on the date specified and do not include any additions or deletions subsequent to date specified.
- The State Board shall periodically evaluate the norms to determine if revisions should be made. Any revisions shall be promulgated in accordance with the provisions of the Illinois Administrative Procedure Act [5 ILCS 100] (1991, Rev. Stat. 1991, Ch. 127, Par. 1-101 et seq.).

(Source: Amended at 19 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

## DEPARTMENT OF PUBLIC HEALTH/HEALTH FACILITIES PLANNING BOARD

## NOTICE OF PROPOSED AMENDMENTS

## Section 1110. APPENDIX C Statutory Citations for all State and Federal Laws and Regulations Referenced in Chapter 3

- "Ambulatory Surgical Treatment Center Act" [210 ILCS 5] (1991, Rev. Stat. 1991, Ch. 111-1/27, Par. 1-57 et seq.)
- Renal Disease Treatment Act [410 ILCS 430] "An Act in Relation to Public Health" (1987, Rev. Stat. 1987, Ch. 111-1/27, Par. 1-22-33)
- Developmental Disability Prevention Act [410 ILCS 250] "An Act Relating to the Prevention of Developmental Disabilities" (1987, Rev. Stat. 1987, Ch. 111-1/27, Par. 1-22-33)
- "Hospital Licensing Act" [210 ILCS 85] (1987, Rev. Stat. 1987, Ch. 111-1/27, Par. 1-142 et seq.)
- "Illinois Administrative Procedure Act" [5 ILCS 100] (1991, Rev. Stat. 1991, Ch. 127, Par. 1-101 et seq.)
- "Illinois Health Care Facilities Planning Act [20 ILCS 3960] The" (1987, Rev. Stat. 1987, Ch. 111-1/27, Par. 1-151 et seq.)
- "Illinois Mental Health and Developmental Disabilities Code [405 ILCS 5] " (1987, Rev. Stat. 1987, Ch. 111-1/27, Par. 1-100 et seq.)
- "National Health Planning and Resources Development Act of 1974" (P.L. 93-641) (42 U.S.C. 300k)
- "Nursing Home Care Reform Act [210 ILCS 45] of 1979" (1979, Rev. Stat. 1987, Ch. 111-1/27, Par. 1-151 et seq.)
- "Social Security Act - Title XVIII" (42 U.S.C. 1395)
- "Social Security Act - Title XIX" (42 U.S.C. 1396)
- "Social Security Amendments of 1982" P.L. 92-603 (42 U.S.C. 1329)
- (Source: Amended at 19 Ill. Reg. \_\_\_\_\_, effective \_\_\_\_\_)

## DEPARTMENT OF AGRICULTURE

## NOTICE OF ADOPTED AMENDMENTS

- 1) Heading of the Part: Weights and Measures Act
- 2) Code Citation: 8 Ill. Adm. Code 600
- 3) Section Numbers: Adopted Action:

600.1	Amended
600.300	Amended
600.320	Amended
600.670	Amended
600.TABLE E	Amended
- 4) Statutory Authority: Section 8 of the Weights and Measures Act [225 ILCS 470/8]
- 5) Effective Date of amendments: June 7, 1995
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this proposed amendment contain incorporations by reference? Yes
- 8) Date Filed in Agency's Principal Office: June 7, 1995
- 9) Notices of Proposal Published in Illinois Register:  
March 3, 1995, 19 Ill. Reg. 2356
- 10) Has JCAR issued a Statement of Objections to these rules? No
- 11) Differences between proposal and final version: References to the Illinois Revised Statutes were removed, and non-substantive editorial corrections were made.
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? No agreement letter was issued by JCAR.
- 13) Will this amendment replace an emergency amendment in effect? No
- 14) Are there any amendments pending on this Part? No

15) Summary and Purpose of amendments: The National Bureau of Standards is now referred to as the National Institute of Standards and Technology, and therefore all references to the National Bureau of Standards in Sections 600.1, 600.300, 600.670, and 600.TABLE E have been changed to reflect that name change.

The State Police have recently acquired wheel load weighing scales for the enforcement of highway weight laws. Therefore, load test procedures for certification of these types of scales are being amended in Section

## DEPARTMENT OF AGRICULTURE

## NOTICE OF ADOPTED AMENDMENTS

- 600.320.
- 16) Information and questions regarding these rules shall be directed to:

Name:	Debbie Wakefield
Address:	Illinois Department of Agriculture State Fairgrounds Springfield, Illinois 62794-9281
Telephone:	217/785-5713
FAX:	217/785-4505

The full text of Adopted Amendments begins on the next page:



DEPARTMENT OF AGRICULTURE

NOTICE OF ADOPTED AMENDMENTS

TITLE 8: AGRICULTURE AND ANIMALS  
CHAPTER I: DEPARTMENT OF AGRICULTURE  
SUBCHAPTER P: WEIGHTS AND MEASURES

PART 600

WEIGHTS AND MEASURES ACT

SUBPART A: PACKAGING AND LABELING

Section	
600.1	National Institute Bureau of Standards and Technology Handbook 130
600.10	Definitions (Repealed)
600.20	Application (Repealed)
600.30	Identity (Repealed)
600.40	Declaration of Identity: Nonconsumer Package (Repealed)
600.50	Declaration of Responsibility: Consumer and Nonconsumer Packages (Repealed)
600.60	Declaration of Quantity: Consumer Packages (Repealed)
600.70	Declaration of Quantity: Nonconsumer Packages (Repealed)
600.80	Prominence and Placement: Consumer Packages (Repealed)
600.90	Prominence and Placement: Nonconsumer Package (Repealed)
600.100	Requirements: Specific Consumer Commodities, Packages, Containers (Repealed)
600.110	Exemptions (Repealed)
600.120	Variations to be Allowed (Repealed)
600.130	Standards of Fill (Repealed)
600.140	Wholesale and Retail Exemption
600.150	Revocation of Conflicting Regulations (Repealed)
600.160	Tables: Weights and Measures Standards for Illinois

SUBPART B: ROOFING AND ROOFING MATERIALS

Section	
600.250	Roofing and Roofing Materials Shall Be Sold Either by the "Square" or by the "Square Yard." (Repealed)

SUBPART C: WEIGHING AND MEASURING DEVICES:  
METERS -- SCALES -- FEES

Section	
600.300	Vehicle Scales Regulation
600.310	Fees
600.320	Scales Used for the Enforcement of Highway Weight Laws

SUBPART D: MOISTURE METER TESTING

Section	
600.350	General (Repealed)

DEPARTMENT OF AGRICULTURE

NOTICE OF ADOPTED AMENDMENTS

600.360	Testing and Inspection (Repealed)
600.370	Rejected Moisture Testing Devices (Repealed)
600.380	Use of Moisture Measuring Devices (Repealed)

SUBPART E: REGISTRATION OF SERVICE AGENCIES, SERVICEMEN,  
AND SPECIAL SEALERS FOR COMMERCIAL  
WEIGHING AND MEASURING DEVICES

Section	
600.450	Policy (Repealed)
600.460	Definitions (Repealed)
600.470	Certificate of Registration (Repealed)
600.480	Types of Certificates (Repealed)
600.490	Examinations (Repealed)
600.500	Exemptions (Repealed)
600.510	Registration Fee (Repealed)
600.520	Reports (Repealed)
600.530	Bonds (Repealed)
600.540	Standards and Testing Equipment (Repealed)
600.550	Revocation of Certificate of Registration (Repealed)
600.560	Publication of Lists (Repealed)

SUBPART F: LIQUID PETROLEUM MEASURING DEVICES

Section	
600.650	Use of Gasoline Pumps Which Are Not Capable of Computing the Prices Which Exceed 99.9¢ Per Gallon
600.660	Retail Liquid Petroleum Pumps Accurately Marked: Liters or Gallons
600.670	System Used to Sell Petroleum Product
600.680	Unit Price per Gallon Displayed (Repealed)
600.690	Price of Gasoline
600.700	Unit Price Indicator: Set at One-Half Total Selling Price
600.710	Decals or Stickers Affixed to the Pump Face
600.720	Information Sign Indicating Half Gallon Pricing of Gasoline
600.730	Conversion Kits or Replacement Pumps: Deadline (Repealed)
600.740	Three-Wheel Computers Prohibited
600.750	One-Half Gallon Pricing Applicable to All Metering Pumps at Facility
600.760	Stop Use Order: Hearing

SUBPART G: ADVERTISEMENT OF THE PRICE OF LIQUID  
PETROLEUM PRODUCTS

Section	
600.800	Price Per Gallon or Liter in Advertisement
600.810	Height and Width of Numbers
600.820	Advertised Price Complete
600.830	Advertising Other Commodities: Misleading Advertising Prohibited
600.840	Product Identity and Type of Service

## DEPARTMENT OF AGRICULTURE

## NOTICE OF ADOPTED AMENDMENTS

600.850 Advertisement of Price Not Required Except on Pump  
600.860 Stop Use Order; Hearing

TABLE A	Minimum Height of Numbers and Letters (Repealed)
TABLE B	Standard Weight Per Bushel for Agricultural Commodities
TABLE C	Illinois Standard Weights and Measures
TABLE D	Equivalents: Cubic Inches in U.S. Standard Capacity Measures
TABLE E	Weights of Coal Per Cubic Foot
TABLE F	Equivalents to be used by Seller in Transposing Weights
TABLE G	Measurement of Surfaces and Volumes

**AUTHORITY:** Implementing and authorized by Section 8 of the Weights and Measures Act (1991-Rev. 1991-CH-147-Par-188) [225 ILCS 470/8].

**SOURCE:** Rules and Regulations Relating to the Weights and Measures Act, filed December 17, 1969, effective January 1, 1970; amended November 5, 1971, effective November 15, 1971; amended August 26, 1975, effective September 4, 1975; amended March 22, 1976, effective April 1, 1976; amended at 3 Ill. Reg. 45, p. 72, effective October 29, 1979; amended at 3 Ill. Reg. 45, p. 81, effective January 1, 1980; codified at 5 Ill. Reg. 10562, effective October 1, 1981; amended at 12 Ill. Reg. 8306, effective May 3, 1988; amended at 12 Ill. Reg. 15524, effective September 20, 1988; emergency amendment at 18 Ill. Reg. 4426, effective March 7, 1994, for a maximum of 150 days; amended at 18 Ill. Reg. 14692, effective September 13, 1994; amended at 19 Ill. Reg. 8114, effective JUN 07 1995.

## SUBPART A: PACKAGING AND LABELING

## Section 600.1 National Institute Bureau of Standards and Technology Handbook 130

The uniform packaging and labeling regulation and the uniform regulation for the Method of Sale of Commodities in the National Institute Bureau of Standards and Technology Handbook 130, and any of its subsequent supplements or revisions ~~thereof~~, shall be the requirements and standards governing the packaging, labeling and method of sale of commodities for this State, except insofar as specifically modified, amended, or rejected by regulation issued by the Director (Section 8 of the Weights and Measures Act (1991-Rev. 1991-CH-147-Par-188) [225 ILCS 470/8]). National Institute Bureau of Standards and Technology Handbook 130 is available from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. The following sections of the Method of Sale of Commodities requirements shall not be adopted:

- 1) Section 1.2 (Bread),
- 2) Section 2.20 (Gasoline- Oxygenate Blends), and
- 3) Section 1.9.2 (Unit Price Advertising).

(Source: Amended at 19 Ill. Reg. 8114, effective JUN 07 1995)

## DEPARTMENT OF AGRICULTURE

## NOTICE OF ADOPTED AMENDMENTS

SUBPART C: WEIGHING AND MEASURING DEVICES:  
METERS -- SCALES -- FEES

## Section 600.300 Vehicle Scales Regulation

- a) Except for scales used for the enforcement of highway weight laws, all vehicle scales shall comply with the requirement of the National Institute Bureau of Standards and Technology Standards Handbook 44, which is adopted in Section 8 of the Weights and Measures Act (1991-Rev. 1991-CH-147-Par-188) [225 ILCS 470/8] and shall, in addition, meet either 1, 2 or 3 of the following requirements:
- 1) Pit Vehicle Scales - All pit vehicle scales shall be installed to comply with the following requirements:
    - A) The pit shall have a minimum depth of 32 inches to be measured from the bottom of the eyebeam to the floor of the pit.
    - B) Floor of the pit is to be constructed of concrete with drainage.
  - 2) Low Profile Pitless Vehicle Scales - All low profile pitless vehicle scales shall be installed to comply with the following requirements:
    - A) A concrete pad shall be poured underneath the entire length and width of the scale at or above ground level.
    - B) The scale shall be installed to insure that surface water will drain away from the scale area.
    - C) Clearance of at least four inches shall be provided from the bottom of the eyebeam to the top of the concrete pad of the underneath side of the scale.
    - D) Clearance of at least three feet shall be provided around the sides of the scale to insure for proper cleaning and servicing.

## 3) Portable Pitless Vehicle Scales

- A) Temporary Use of Scale - the scale may be used at the same facility for a period of not more than twelve months from the date of the initial state certification.
  - B) Limited Use of Scale - the scale shall be used only for the weighing of soil, gravel, sand, cement and other building materials.
  - C) State Test Required - a state scale test (Sections 10 and 30 of the Weights and Measures Act) is required prior to the use of the scale. This procedure is to be repeated each time the scale is moved.
- b) Livestock Scales. Livestock scales shall comply with the requirements of National Institute Bureau of Standards and Technology Handbook 44 and regulations established by the U.S. Department of Agriculture, Packers and Stockyards Division.
- c) National Institute Bureau of Standards and Technology Handbook 44 is available from the Superintendent of Documents, U.S. Government



## DEPARTMENT OF AGRICULTURE

## NOTICE OF ADOPTED AMENDMENTS

Printing Office, Washington, D.C. 20402.

(Source: Amended at 19 Ill. Reg. 81141, effective  
JUN 07 1995)

## Section 600.320 Scales Used for the Enforcement of Highway Weight Laws

The following procedures will be used to determine the certification of scales used for the enforcement of highway weight laws. These procedures will determine if a scale(s) is to be certified or condemned. These rules supersede those published in the National Institute of Standards and Technology's Handbook 44.

- a) An increasing load test consisting of at least 20,000 pounds of known test weight shall be conducted on all scales. A minimum of two known test weight loads shall be applied, normally at the capacity of test weight load and another at one half capacity of the test weight load to each scale.
- b) One decreasing load test shall be conducted at 12,000 pounds of known test weight to 9,000 pounds of known test weight. If multiple scales are used in combination, a decreasing load test shall be performed on at least one scale.
- c) A minimum build up or strain load test shall be conducted as follows:
  - 1) wheel load and portable axle load scales - 10,000 ~~20,000~~ pounds
  - 2) wheel load and portable axle load scales used in pairs - 20,000 pounds
  - 3) ~~2~~ permanently installed axle load scales - 20,000 pounds
  - 4) ~~3~~ all other scales - 40,000 pounds
- d) At least one repeatability test shall be conducted ~~at 12,000 pounds~~. Any errors found shall agree within the absolute value of the maintenance tolerance for that load, and shall be within applicable tolerance.
- e) The tolerances to each of the above tests shall be those listed in the scale code of the latest edition of the National Institute of Standards and Technology's Handbook 44.
- f) All new scales and associated equipment must have a certificate of conformance issued by the National Type Evaluation Program.
- g) Electronic indicating elements equipped with recording elements shall be equipped with effective means to permit the recording of weight values only when the indication is stable within plus or minus three scale divisions.
- h) The maximum scale division shall be 100 pounds.
- i) For axle, portable axle, and wheel load weigher scales, a vehicle must be in a reasonably level condition at the time the weight is being determined. Reasonably level means the vehicle must remain stationary during weighing without the use of any external braking force.
- j) For all other scales used to determine the weight of axles when part of the truck is not resting on a scale, the vehicle must be in a reasonably level condition at the time the weight is being determined.

## DEPARTMENT OF AGRICULTURE

## NOTICE OF ADOPTED AMENDMENTS

- k) All scales used for the enforcement of highway weight laws shall be certified at least once every twelve months.
- 1) Any registered serviceperson of the Illinois Department of Agriculture has the authority to place into service scales used for the enforcement of highway weight laws if the serviceperson conforms to the procedures listed above.

(Source: Amended at 19 Ill. Reg. 81141, effective  
JUN 07 1995)

## Section 600.670 System Used to Sell Petroleum Product

When a petroleum retailer sells a petroleum product by either the inch pound or metric system as defined by the National Institute Bureau of Standards and Technology, only that system shall apply to all metering pumps at the facility.

(Source: Amended at 19 Ill. Reg. 81141, effective  
JUN 07 1995)

## DEPARTMENT OF AGRICULTURE

## NOTICE OF ADOPTED AMENDMENTS

## Section 600. TABLE E Weights of Coal Per Cubic Foot

(Table prepared by U. S. National Institute Bureau of Standards and Technology)

## Anthracite

	White Ash	Red Ash
Egg.....	57.0	53.0
Stove.....	56.5	52.5
Nut.....	55.5	52.0
Pea.....	53.5	51.0
Buckwheat.....	53.0	50.5

## Bituminous

Weights vary from 47 to 55 pounds per cubic foot.

Cubic Feet Per Ton of Coal (Based upon above table).

	White Ash	Red Ash
Egg.....	35.09	37.73
Stove.....	35.59	38.09
Nut.....	36.03	38.46
Pea.....	37.38	39.21
Buckwheat.....	37.73	39.60

(Source: Amended at 19 Ill. Reg. 8114', effective

JUN 07 1995)

## TITLE 8: AGRICULTURE AND ANIMALS

## CHAPTER I: DEPARTMENT OF AGRICULTURE

## SUBCHAPTER P: WEIGHTS AND MEASURES

## PART 600

## WEIGHTS AND MEASURES ACT

## SUBPART A: PACKAGING AND LABELING

## Section

600.1	National Bureau Institute of Standards and Technology Handbook 130
600.10	Definitions (Repealed)
600.20	Application (Repealed)
600.30	Identity (Repealed)
600.40	Declaration of Identity: Nonconsumer Package (Répealed)
600.50	Declaration of Responsibility: Consumer and Nonconsumer Packages (Repealed)
600.60	Declaration of Quantity: Consumer Packages (Repealed)
600.70	Declaration of Quantity: Nonconsumer Packages (Repealed)
600.80	Prominence and Placement: Consumer Packages (Repealed)

## DEPARTMENT OF AGRICULTURE

## NOTICE OF ADOPTED AMENDMENTS

600.90 Prominence and Placement: Nonconsumer Package (Repealed)

600.100 Requirements: Specific Consumer Commodities, Packages, Containers (Repealed)

600.110 Exemptions (Repealed)

600.120 Variations to be Allowed (Repealed)

600.130 Standards of Fill (Repealed)

600.140 Wholesale and Retail Exemption

600.150 Revocation of Conflicting Regulations (Repealed)

600.160 Tables: Weights and Measures Standards for Illinois

## SUBPART B: ROOFING AND ROOFING MATERIALS

Section  
600.250

Roofing and Roofing Materials Shall Be Sold Either by the "Square" or by the "Square Yard." (Repealed)

SUBPART C: WEIGHING AND MEASURING DEVICES:  
METERS -- SCALES -- FEES

Section  
600.300  
600.310  
600.320

Vehicle Scales Regulation

Fees

Scales Used for the Enforcement of Highway Weight Laws

## SUBPART D: MOISTURE METER TESTING

Section  
600.350  
600.360  
600.370  
600.380

General (Repealed)

Testing and Inspection (Repealed)

Rejected Moisture Testing Devices (Repealed)

Use of Moisture Measuring Devices (Repealed)

SUBPART E: REGISTRATION OF SERVICE AGENCIES, SERVICEMEN,  
AND SPECIAL SEALERS FOR COMMERCIAL  
WEIGHING AND MEASURING DEVICES

Section  
600.450  
600.460  
600.470  
600.480  
600.490  
600.500  
600.510  
600.520  
600.530  
600.540  
600.550

Policy (Repealed)

Definitions (Repealed)

Certificate of Registration (Repealed)

Types of Certificates (Repealed)

Examinations (Repealed)

Exemptions (Repealed)

Registration Fee (Repealed)

Reports (Repealed)

Bonds (Repealed)

Standards and Testing Equipment (Repealed)

Revocation of Certificate of Registration (Repealed)



## DEPARTMENT OF AGRICULTURE

## NOTICE OF ADOPTED AMENDMENTS

## 600.560 Publication of Lists (Repealed)

## SUBPART F: LIQUID PETROLEUM MEASURING DEVICES

Section  
600.650 Use of Gasoline Pumps Which Are Not Capable of Computing the Prices Which Exceed 99.9c Per Gallon  
600.660 Retail Liquid Petroleum Pumps Accurately Marked: Liters or Gallons  
600.670 System Used to Sell Petroleum Product  
600.680 Unit Price Per Gallon Displayed (Repealed)  
600.690 Price of Gasoline  
600.700 Unit Price Indicator: Set at One-Half Total Selling Price  
600.710 Decals or Stickers Affixed to the Pump Face  
600.720 Information Sign Indicating Half Gallon Pricing of Gasoline  
600.730 Conversion Kits or Replacement Pumps: Deadline (Repealed)  
600.740 Three-Wheel Computers Prohibited  
600.750 One-Half Gallon Pricing Applicable to All Metering Pumps at Facility  
600.760 Stop Use Order; Hearing

## SUBPART G: ADVERTISEMENT OF THE PRICE OF LIQUID PETROLEUM PRODUCTS

Section  
600.800 Price Per Gallon or Liter in Advertisement  
600.810 Height and Width of Numbers  
600.820 Advertised Price Complete  
600.830 Advertising Other Commodities: Misleading Advertising Prohibited  
600.840 Product Identity and Type of Service  
600.850 Advertisement of Price Not Required Except on Pump  
600.860 Stop Use Order; Hearing

TABLE A Minimum Height of Numbers and Letters (Repealed)  
TABLE B Standard Weight Per Bushel for Agricultural Commodities  
TABLE C Illinois Standard Weights and Measures  
TABLE D Equivalents: Cubic Inches in U.S. Standard Capacity Measures  
TABLE E Weights of Coal Per Cubic Foot  
TABLE F Equivalents to be used by Seller in Transposing Weights  
TABLE G Measurement of Surfaces and Volumes

AUTHORITY: Implementing and authorized by Section 8 of the Weights and Measures Act (Ill. Rev. Stat. 1991, ch. 147, par. 108) [225 ILCS 470/8].

SOURCE: Rules and Regulations Relating to the Weights and Measures Act, filed December 17, 1969, effective January 1, 1970; amended November 5, 1971, effective November 15, 1971; amended August 26, 1975, effective September 4, 1975; amended March 22, 1976, effective April 1, 1976; amended at 3 Ill. Reg. 45, p. 72, effective October 29, 1979; amended at 3 Ill. Reg. 45, p. 81, effective January 1, 1980; codified at 5 Ill. Reg. 10562, effective October 1,

## DEPARTMENT OF AGRICULTURE

## NOTICE OF ADOPTED AMENDMENTS

1981; amended at 12 Ill. Reg. 8306, effective May 3, 1988; amended at 12 Ill. Reg. 15524, effective September 20, 1988; emergency amendment at 18 Ill. Reg. 4426, effective March 7, 1994, for a maximum of 150 days; amended at 18 Ill. Reg. 14692, effective September 13, 1994; amended at 19 Ill. Reg. 8114, effective JUN 07 1995.

## SUBPART A: PACKAGING AND LABELING

## Section 600.1 National Bureau Institute of Standards and Technology Handbook 130

The Uniform Packaging and Labeling Regulation and the Uniform Regulation for the Method of Sale of Commodities in the National Bureau Institute of Standards and Technology Handbook 130, and any of its subsequent supplements or revisions ~~therein~~, shall be the requirements and standards governing the packaging, labeling, and method of sale of commodities for this State, except insofar as specifically modified, amended, or rejected by regulation issued by the Director (Section 8 of the Weights and Measures Act (Ill. Rev. Stat. 1991, ch. 147, par. 108) [225 ILCS 470/8]). National Bureau Institute of Standards and Technology Handbook 130 is available from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. The following sections of the Method of Sale of Commodities requirements shall not be adopted:

- Section 1.2 (Bread),
- Section 2.20 (Gasoline-Oxygenate Blends), and
- Section 1.9.2 (Unit Price Advertising).

(Source: Amended at 19 Ill. Reg. 8114, effective JUN 07 1995)

## SUBPART C: WEIGHING AND MEASURING DEVICES:

METERS -- SCALES -- FEES

## Section 600.300 Vehicle Scales Regulation

- Except for scales used for the enforcement of highway weight laws, all vehicle scales shall comply with the requirement of the National Bureau Institute of Standards and Technology Handbook 14, which is adopted in Section 8 of the Weights and Measures Act (Ill. Rev. Stat. 1991, ch. 147, par. 108) [225 ILCS 470/8] and shall, in addition, meet either 1, 2 or 3 of the following requirements:

1) Pit Vehicle Scales - All pit vehicle scales shall be installed to comply with the following requirements:

- The pit shall have a minimum depth of 32 inches to be measured from the bottom of the eyebeam to the floor of the pit.
  - Floor of the pit is to be constructed of concrete with drainage.
- 2) Low Profile Pitless Vehicle Scales - All low profile pitless

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vehicle scales shall be installed to comply with the following requirements:

- A) A concrete pad shall be poured underneath the entire length and width of the scale at or above ground level.
  - B) The scale shall be installed to insure that surface water will drain away from the scale area.
  - C) Clearance of at least four inches shall be provided from the bottom of the eyebeam to the top of the concrete pad of the underneath side of the scale.
  - D) Clearance of at least three feet shall be provided around the sides of the scale to insure for proper cleaning and servicing.
- 3) Portable Pitless Vehicle Scales
- A) Temporary Use of Scale - the scale may be used at the same facility for a period of not more than twelve months from the date of the initial state certification.
  - B) Limited Use of Scale - the scale shall be used only for the weighing of soil, gravel, sand, cement and other building materials.
  - C) State Test Required - a state scale test (Sections 10 and 30 of the Weights and Measures Act) is required prior to the use of the scale. This procedure is to be repeated each time the scale is moved.
  - b) Livestock Scales. Livestock scales shall comply with the requirements of National Bureau Institute of Standards and Technology Handbook 44 and regulations established by the U.S. Department of Agriculture, Packers and Stockyards Division.
  - c) National Bureau Institute of Standards and Technology Handbook 44 is available from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.

(Source: Amended at 19 Ill. Reg. 8114, effective JUN-07-1995)

**Section 600.320 Scales Used for the Enforcement of Highway Weight Laws**

The following procedures will be used to determine the certification of scales used for the enforcement of highway weight laws. These procedures will determine if a scale(s) is to be certified or condemned. These rules supersede those published in the National Institute of Standards and Technology's Handbook 44.

- a) An increasing load test consisting of at least 20,000 pounds of known test weight shall be conducted on all scales. A minimum of two known test weight loads shall be applied, normally at the capacity of test weight load and another at one half capacity of the test weight load to each scale.
- b) One decreasing load test shall be conducted at 12,000 pounds of known test weight to 9,000 pounds of known test weight. If multiple scales

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are used in combination, a decreasing load test shall be performed on at least one scale.

- c) A minimum build up or strain load test shall be conducted as follows:
  - 1) wheel load and portable axle load scales - ~~20,000~~ 10,000 pounds
  - 2) wheel load and portable axle load scales used in pairs - 20,000 pounds
- 3) ~~2~~ permanently installed axle load scales - 20,000 pounds
- 4) ~~3~~ all other scales - 40,000 pounds
- d) At least one repeatability test shall be conducted ~~at - 12,000 - pounds~~. Any errors found shall agree within the absolute value of the maintenance tolerance for that load, and shall be within applicable tolerance.
- e) The tolerances to each of the above tests shall be those listed in the scale code of the latest edition of the National Institute of Standards and Technology's Handbook 44.
- f) All new scales and associated equipment must have a certificate of conformance issued by the National Type Evaluation Program.
- g) Electronic indicating elements equipped with recording elements shall be equipped with effective means to permit the recording of weight values only when the indication is stable within plus or minus three scale divisions.
- h) The maximum scale division shall be 100 pounds.
- i) For axle, portable axle, and wheel load weigher scales, a vehicle must be in a reasonably level condition at the time the weight is being determined. Reasonably level means the vehicle must remain stationary during weighing without the use of any external braking force.
- j) For all other scales used to determine the weight of axles when part of the truck is not resting on a scale, the vehicle must be in a reasonably level condition at the time the weight is being determined.
- k) All scales used for the enforcement of highway weight laws shall be certified at least once every twelve months.
- l) Any registered serviceperson of the Illinois Department of Agriculture has the authority to place into service scales used for the enforcement of highway weight laws if the serviceperson conforms to the procedures listed above.

(Source: Amended at 19 Ill. Reg. 8114, effective JUN-07-1995)

**SUBPART F: LIQUID PETROLEUM MEASURING DEVICES****Section 600.670 System Used to Sell Petroleum Product**

When a petroleum retailer sells a petroleum product by either the inch pound or metric system as defined by the National Bureau Institute of Standards and Technology, only that system shall apply to all metering pumps at the facility.

(Source: Amended at 19 Ill. Reg. 8114, effective



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Section 600. TABLE E Weights of Coal Per Cubic Foot

(Table prepared by U. S. National Bureau Institute of Standards and Technology)

Anthracite

	White Ash	Red Ash
Egg.....	57.0	53.0
Stove.....	56.5	52.5
Nut.....	55.5	52.0
Pea.....	53.5	51.0
Buckwheat.....	53.0	50.5

Bituminous

Weights vary from 47 to 55 pounds per cubic foot.

Cubic Feet Per Ton of Coal (Based upon above table).

	White Ash	Red Ash
Egg.....	35.09	37.73
Stove.....	35.59	38.09
Nut.....	36.03	38.46
Pea.....	37.38	39.21
Buckwheat.....	37.73	39.60

(Source: Amended at 19 Ill. Reg. JUN 07 1995)

8114, effective

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1) Heading of the Part: Conditions of Employment

2) Code Citation: 80 Ill. Adm. Code 303

3) Section Number: Adopted Action:

303.90	Amend
303.125	Amend
303.130	New
303.140	Amend
303.145	Amend
303.148	Amend
303.155	Amend
303.390	New

4) Statutory Authority: Implementing and authorized by the Personnel Code [20 ILCS 415/8]; [20 ILCS 415/8c].

5) Effective Date of Rules: June 7, 1995

6) Does this rulemaking contain an automatic repeal date? No.

7) Do the Rules contain incorporations by reference? No.

8) Date Filed in Agency's Principal Office:

9) Notice of Proposal Published in Illinois Register:

March 10, 1995, 19 Ill. Reg. 2524

10) Has JCAR issued a Statement of Objections to the Amendments? No.

11) Differences between proposal and final version:

In Subsection 303.390(d)(4), "The State may recover payments" was changed to "the agency that paid the tuition may recover payments".

Several minor editing changes were made.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes.

13) Will the Rules replace an emergency rule currently in effect? No.

14) Are there any amendments pending on this Part? Yes.

Section Number Proposed Action Ill. Reg. Citation

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303.155 Amendment 19 Ill. Reg. 6222

15) Summary and Purpose of Rules:

Section 303.90 The amendment to Section 303.90 will remove the 30 day limitation currently in effect for use of sick leave for family illness in any calendar year. This change will conform the Personnel Rules to the collective bargaining agreement. In addition, employees who do not use any of their sick days in a calendar year will be awarded an additional personal day on January 1 of the next calendar year. This is also consistent with the collective bargaining agreement. The first date on which an additional personal day can be awarded is January 1, 1996.

Section 303.125(a). The amendment conforms this section to Section 303.90 by providing that employees who do not use any of their sick days in a calendar year will be awarded an additional personal day on January 1 of the next calendar year.

Section 303.130. The addition of Section 303.130 will conform the Personnel Rules to the collective bargaining agreement and provide that covered members will be eligible for 10 days paid maternity/paternity leave per year.

303.140. The change to Section 303.140 will remove the requirement of the Director's (Central Management Services) approval of leaves of absence without pay to employees for periods not to exceed six months. This change will assist the Department in decentralizing certain transactions and allow agencies under the jurisdiction of the Personnel Code to complete paperwork without the approval of the Director.

303.145. The amendment to Section 303.145 will allow the State Employees' Retirement System to select an impartial physician when the agency and the employee cannot agree upon the selection of an impartial physician.

Section 303.148(n). The addition to 303.148 will provide that an employee's health and dental insurance will be paid for up to six months while the employee is on family responsibility leave.

303.155. The change to Section 303.155 will remove the requirement of the Director's (Central Management Services) approval of leaves of absence for certified employees who accept appointment to a position which is exempt from Jurisdiction B of the Personnel Code. This change will assist the Department in decentralizing certain transactions and allow agencies under the jurisdiction of the Personnel Code to complete paperwork without the approval of the Director.

Section 303.390 Tuition Reimbursement. The new section contains rules to implement and clarify Section 8c(3) of the Personnel Code which sets forth



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the conditions under which State employees may receive tuition reimbursement.

- 16) Information and questions regarding this adopted rule shall be directed to:

Stephen W. Seiple  
720 Stratton Office Building  
Springfield, IL 62706  
(217)782-9669  
TDD (217)785-3979

The full text of the Adopted Amendments begin on the next page.

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TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES  
SUBTITLE B: PERSONNEL RULES, PAY PLANS, AND

## POSITION CLASSIFICATIONS

## CHAPTER I: DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

## PART 303

## CONDITIONS OF EMPLOYMENT

## SUBPART A: GRIEVANCE PROCEDURE

Section	
303.10	Definition of a Grievance
303.20	Procedure
303.30	Grievance Committee
303.45	Representation

## SUBPART B: LEAVE OF ABSENCE

Section	
303.90	Sick Leave
303.100	Accumulation of Sick Leave
303.102	Payment in Lieu of Sick Leave
303.105	Reinstatement of Sick Leave
303.110	Advancement of Sick Leave
303.112	Sick Leave Bank
303.115	Veterans Hospital Leave
303.125	Leave for Personal Business
303.130	Maternity/Paternity and Adoption Leave
303.135	On-The-Job Injury -- Industrial Disease
303.140	Leaves of Absence Without Pay
303.142	Leave to Attend Union Conventions
303.145	Disability Leave
303.148	Family Responsibility Leave
303.150	Employee Rights After Leave
303.153	Failure to Return
303.155	Leave to Take Exempt Position
303.160	Military and Peace Corps Leave
303.170	Military Reserve Training and Emergency Call-Up
303.171	Leave for Military Physical Examinations
303.175	Disaster Service Leave With Pay
303.180	Attendance in Court
303.190	Authorized Holidays
303.200	Holiday Observance
303.215	Payment for Holidays
303.220	Holiday During Vacation
303.225	Eligibility for Holiday Pay
303.250	Vacation Eligibility
303.260	Prorated Vacation for Part-Time Employees

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303.270 Vacation Schedule and Loss of Earned Vacation  
 303.290 Payment in Lieu of Vacation  
 303.295 Vacation Benefits on Death of Employee

## SUBPART C: WORK HOURS AND SCHEDULES

Section  
 303.300 Work Schedules  
 303.310 Emergency Shut-Down  
 303.320 Overtime  
 303.330 Overtime Payable Upon Death  
 303.340 Attendance Records  
 303.350 Notification of Absence  
 303.355 Review of Attendance Records

## SUBPART D: UNDATED OR INCOMPLETE FORMS

Section  
 303.360 Undated Forms  
 303.370 Incomplete Forms

## SUBPART E: EMPLOYEE SEPARATIONS

Section  
 303.380 Reason for Separation  
 303.385 Repayment of Benefit Time

## SUBPART F: TUITION REIMBURSEMENT

Section  
303.390 Tuition Reimbursement

**AUTHORITY:** Implementing and authorized by the Personnel Code [20 ILCS 415].

**SOURCE:** Filed May 29, 1975; amended at 3 Ill. Reg. 22, p. 78, effective June 1, 1979; amended at 3 Ill. Reg. 26, p. 199, effective July 1, 1979; emergency amendment at 3 Ill. Reg. 48, p. 188, effective January 1, 1980 for a maximum of 150 days; amended at 4 Ill. Reg. 11, p. 70, effective March 1, 1980; amended at 4 Ill. Reg. 15, p. 216, effective March 31, 1980; amended at 4 Ill. Reg. 22, p. 227, effective June 1, 1980; amended at 5 Ill. Reg. 8029, effective August 1, 1981; codified at 7 Ill. Reg. 13209; emergency amendment at 8 Ill. Reg. 329, effective January 1, 1984 for a maximum of 150 days; amended at 8 Ill. Reg. 7788, effective May 23, 1984; amended at 14 Ill. Reg. 3433, effective February 27, 1990; emergency amendment at 15 Ill. Reg. 5076, effective March 20, 1991, for a maximum of 150 days; emergency expired August 17, 1991; amended at 15 Ill. Reg. 5214, effective April 2, 1991; amended at 15 Ill. Reg. 14067, effective September 12, 1991; amended at 16 Ill. Reg. 8368, effective May 21, 1992; amended at 17 Ill. Reg. 5587, effective March 29, 1993; amended at 19

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Ill. Reg. 8130, effective JUN 07 1995

## SUBPART B: LEAVE OF ABSENCE

## Section 303.90 Sick Leave

All employees, excepting those in emergency, intermittent, per diem or temporary status, unless such status is the result of accepting a non-permanent working assignment in another class, shall accumulate sick leave at the rate of one day for each month's service. Sick leave may be used for illness, disability or injury of the employee, appointments with doctor, dentist or other professional medical practitioner and also may be used ~~for not more than 30--days--in--one--calendar--year~~ in the event of serious illness, disability, injury or death of a member of the employee's immediate family. The operating agency or the Department may require evidence to substantiate that such leave days were used for the purpose herein set forth for periods of absence of ten consecutive workdays or less. For periods of absence for more than ten consecutive workdays the employee shall provide verification for such absence in accordance with the provisions of Section 303.145. Beginning with calendar year 1995, in the event an employee does not use sick leave in any calendar year, the employee shall be awarded one (1) additional personal day on January 1 of the next calendar year. A calendar year for purposes of this provision is the period beginning January 1 and ending December 31 of each year. Such additional personal day shall be used in accordance with Section 303.125.

(Source: Amended at 19 Ill. Reg. 8130, effective JUN 07 1995)

## Section 303.125 Leave for Personal Business

a) All employees, excepting those in emergency, per diem or temporary status shall be permitted 3 personal days off each calendar year with pay. Beginning with calendar year 1995, in the event an employee does not use sick leave in any calendar year, the employee shall be awarded one (1) additional personal day on January 1 of the next calendar year. A calendar year for purposes of this provision is the period beginning January 1 and ending December 31 of each year. Such personal days may be used for such occurrences as observance of religious holidays, Christmas shopping, absence due to severe weather conditions, or for other similar personal reasons, but shall not be used to extend a holiday or annual leave except as permitted in advance by the operating agency through prior written approval. Employees entitled to receive such leave who enter service during the year shall be given credit for such leave at the rate of 1/2 day for each 2 months service for the calendar year in which hired. Such personal leave may not be used in increments of less than 2 hours at a time. Except for those emergency situations which preclude the making of prior arrangements, such days off shall be scheduled sufficiently



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in advance to be consistent with operating needs of the employer.

- b) Personal leave shall not accumulate from calendar year to calendar year; nor shall any employee be entitled to payment for unused personal leave upon separation from the service except as provided in Section 8c(2) of the Personnel Code. The accrued leave amount paid under this Section of the Personnel Code shall be certified in writing to the employee by the employing agency. This certification may be held by the employee or forwarded to the Retirement System.

(Source: Amended at 19 Ill. Reg. 8130, effective JUN 07 1995)

## Section 303.130 Maternity/Paternity and Adoption Leave

A covered member of the State employees' group insurance program precertifies the member's or the member's covered dependent's pregnancy within the first two trimesters will be eligible for two weeks or 10 consecutive work days paid maternity/paternity leave after the birth of the child or children. If both the father and the mother are employed by the State, only one parent may be eligible for this leave. An employee with a newly adopted child will be eligible for this two weeks or 10 consecutive work days leave.

(Source: Added 19 Ill. Reg. 8130', effective JUN 07 1995)

## Section 303.140 Leaves of Absence Without Pay

- a) Unless otherwise provided in this Subpart and with the prior approval of the Director, an agency may grant leaves of absence without pay to employees for periods not to exceed 6 months and such leaves may be extended for good cause by the operating agency for additional 6 month periods with the Director's approval.
- b) Any employee, except an employee in a position or program financed in whole or in part by loans or grants made by the United States or any Federal agency, who is elected to State office, shall, upon request, be granted a leave of absence for the duration of the elected terms.
- c) No emergency or temporary employee shall be granted leave of absence.

(Source: Amended 19 Ill. Reg. 8130, effective JUN 07 1995)

## Section 303.145 Disability Leave

- a) An employee who is unable to perform a substantial portion of his/her regularly assigned duties due to temporary physical or mental disability shall upon request be granted a leave for the duration of such disability.
- b) In granting such leave or use of sick leave as provided in Section

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303.90, the agency shall apply the following standards:

- 1) A substantial portion of regularly assigned duties shall be those duties or responsibilities normally performed by the employee which constitute a significant portion of the employee's time or which constitute the differentiating factors which identify that particular position from other positions, provided the balance of duties can be reassigned by the agency;
  - 2) A request for disability leave shall be in writing except when the Agency is advised by other appropriate means of the employee's disability in which event the employee's signature is not required;
  - 3) Except for service-connected disability as provided in Section 303.135, the employee shall have exhausted available sick leave provided under Section 303.90 prior to being granted a disability leave; an employee may use other accrued paid time for this purpose but is not required to do so;
  - 4) During a disability leave, the disabled employee shall provide written verification by a person licensed under the "Medical Practices Act" of 1987 (~~111:Rev-Stat--1987--Ch--1117--Par-1--401 et-seq--~~) [225 ILCS 60] or under similar laws of Illinois or of other states or countries or by an individual authorized by a recognized religious denomination to treat by prayer or spiritual means; such verification shall show the diagnosis, prognosis and expected duration of the disability; such verification shall be made no less often than every 30 days during a period of disability, unless the nature of the disability precludes the need for such frequency of verification;
  - 5) As soon as an employee becomes aware of an impending period of disability, he/she shall notify the appropriate supervisor of such disability and provide a written statement by the attending physician of the approximate date the employee will be unable to perform his/her regularly assigned duties;
  - 6) If the Agency has reason to believe that the employee is able or unable to perform a substantial portion of his/her regularly assigned duties, it may seek and rely upon the decision of an impartial physician chosen by agreement of the parties or in the absence of such agreement upon the decision of an impartial physician who is not a State employee and who is selected by the ~~State~~ State Employees' Retirement System.
- c) Failure of an employee to provide verification of continued disability upon reasonable request shall on due notice cause termination of such leave.
- d) An employee's disability leave shall terminate when said employee is no longer temporarily disabled from performing his/her regularly assigned duties.
- 1) An employee is no longer temporarily disabled when he/she is able to perform his/her regularly assigned duties upon advice of the appropriate authority or, in the absence of such authority, the





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~~State--1991--ch--111--par--4401-et-seq--~~ [225 ILCS 60] or under similar laws of Illinois or of another state or country or by an individual authorized by a recognized religious denomination to treat by prayer or spiritual means, such verification to show the diagnosis, prognosis and expected duration of the disability requiring the employee's presence?

- 2) written report by a social worker, psychologist, or other appropriate practitioner concerning the need for close supervision or care of a child or other family member;
- 3) written direction by an appropriate officer of the courts, a probation officer or similar official directing close supervision of a member of the employee's household or family; or
- 4) an independent verification substantiating that the need for such leave exists.
- h) Such leave shall not be renewed, however a new leave shall be granted at any time for any reason consistent with Section 303.148(f) other than that for which the original leave was granted.
- i) If an agency has reason to believe that the condition giving rise to the given need for such leave no longer exists during the course of the leave, it should require further substantiation or verification and, if appropriate, direct the employee to return to work on a date certain.
- j) Failure of an employee upon request by the employing agency to provide such verification or substantiation is cause on due notice for termination of the leave.
- k) Such leave shall not be used for purpose of securing alternative employment. An employee during such leave may not be gainfully employed full time, otherwise the leave shall terminate.
- l) Upon expiration of a Family Responsibility Leave, or prior to such expiration by mutual agreement between the employee and the employing agency, the agency shall return the employee to the same or similar position classification that the employee held immediately prior to the commencement of the leave. If there is not such position available, the employee will be subject to layoff in accordance with the Section on Voluntary Reduction and Layoff (80 Ill. Adm. Code 302: Subpart J).
- m) Nothing in this Section shall preclude the reallocation or abolition of the position classification of the employee during such leave nor shall the employee be exempt from the Section on Voluntary Reduction and Layoff by virtue of such leave.
- n) The State shall continue payment of its portion of employee and dependent health and dental insurance premiums for up to six (6) months while an employee is on a Family Responsibility Leave consistent with the Federal Family and Medical Leave Act of 1993 and Section 303.148(f)(1), (2) and (3). For leaves defined by Section 303.148(f)(4), (5) and (6), the State shall not continue payment of its portion of employee and dependent health and dental insurance premiums.

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(Source: Amended at 19 Ill. Reg. 8130, effective JUN 07 1995)

## Section 303.155 Leave to Take Exempt Position

~~With prior approval by the Director, an~~ An agency may approve leaves of absence for certified employees who accept appointment in a position which is exempt from Jurisdiction B of the Personnel Code. Such leaves of absence may be for a period of one year or less and may be extended for additional one year periods. At the expiration thereof, an employee shall be restored to the same or similar position upon making application of the employing agency with continuous service including the period of such leave, except that employees who are on leave of absence status from positions subject to Term Appointment and whose rights 1, 1980 shall be subject to the provisions of Term Appointment and whose rights shall be terminated under the provisions of this Part if not reappointed pursuant to 80 Ill. Adm. Code ~~302-841~~ 302.840. ~~In approving such leaves, the Director shall verify the agency approval and employee's agreement.~~

(Source: Amended at 19 Ill. Reg. 8130, effective JUN 07 1995)

## SUBPART F: TUITION REIMBURSEMENT

## Section 303.390 Tuition Reimbursement

- a) Tuition reimbursement is intended to serve as a management tool for the development of employees and for the attainment of agency goals. It should be administered as a mechanism through which mutual advantages are gained by both the employee and the State. Tuition reimbursement is not an unconditional or unilateral employee right or benefit.
- b) Each agency is responsible for providing budgetary funding for its tuition reimbursement program. The policy administered pursuant to these rules is not intended to alter, replace or diminish the content or use of Federal Grant in Aid, agency sponsored stipend or educational leave of absence programs. In administering this policy, other programs should be distinguished from tuition reimbursement programs and treated separately.
- c) Policy Guidelines.  
The following tuition reimbursement guidelines have been developed so as to provide maximum flexibility and a framework within which a decentralized, but uniform, policy can be administered. These guidelines do not preclude agencies from imposing additional requirements or procedures with regard to tuition reimbursement in response to unique training requirements or budgetary restrictions.  
1) Eligibility: Any full time employee is eligible for reimbursement consideration. Employees hired on a temporary or emergency basis are not eligible for consideration.

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- 2) Tuition and Fees: Reimbursement will apply only toward tuition and lab fees. Additional costs such as for books, matriculation, activity and health fees will not be reimbursable expenses.
- 3) Reimbursement: Reimbursement is not to exceed 100% of tuition and lab costs at public institutions, and 80% at private institutions. Agencies may establish an annual dollar cap per employee, depending upon funds available for the program.
- 4) Satisfactory Course Completion: Reimbursement for an approved course is contingent upon the employee submitting evidence of satisfactory completion (e.g., at least a grade of "C") together with receipts documenting the amount of tuition moneys paid. Reimbursement will be accomplished by means of a standard invoice voucher. At no time shall tuition be paid or reimbursed prior to completion of the course.
- 5) Course Load: Course load should be mutually agreed upon by the employee and his or her supervisor and should not harm an employee's on-the-job effectiveness.
- 6) Course Scheduling: Education and/or career development work should be scheduled as an off-duty activity. When a desired course is not available as an off-duty activity, an employee may use vacation or personal time. An employee and his or her supervisor may also arrange a flexible work schedule, provided such a schedule does not adversely affect work loads in his or her unit of assignment.
- 7) Full Participation: Priority should be given to those courses in which full participation is required on a regular basis and where final grades are issued since such conditions provide a reasonable basis against which satisfactory completion can be measured. In those cases where facilities for full participation in classroom instruction are not available or where attendance creates undue hardship, an agency director may approve enrollment in V.A. approved correspondence courses.
- 8) Degree Program: Reimbursement may be approved for work-related courses which are taken to complete requirements for a grammar school certificate or high school diploma, and for courses that lead to the upgrading of skills for the performance of an employee's assigned work responsibilities. Reimbursement may also be approved for work-related courses toward completion of college or graduate level degree programs.
- 9) Enrollment: Applicants will be required to gain approval from their supervisors and agency director (or authorized representative) prior to course enrollment.
- 10) Aid From Other Source: In applying for tuition reimbursement, an employee will indicate whether (s)he is or is not receiving aid from other sources (such as the G.I. bill, Federal Grants, Scholarships, etc.). The fact that an employee is eligible for or receiving aid from another source does not render him or her ineligible for participation in the Tuition Reimbursement

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- Program. However, tuition reimbursement should be made only toward the balance between the outside aid awarded and the remaining tuition due.
- 1) Exclusions: Reimbursement is not intended to apply to in-service training conducted within the agency, nor is it intended to apply to workshops, professional conferences, seminars, or other short term programs.
  - d) Work Commitment/Pay Back. Employees receiving tuition reimbursement from the State shall incur a work commitment to the State.
    - 1) Except as provided in subsection (d)(6) below, if State-paid training did not lead to a post secondary degree, employees shall be obligated to continue in the employ of the State for a period of at least 18 months following completion of the most recent course.
    - 2) If State-paid training did lead to a post secondary degree (i.e., Bachelors, Masters or other higher level professional or post graduate degree) and the State paid for 50% or more of the hours required to earn the degree, employees shall be obligated to continue in the employ of the State for a minimum of four (4) years after receiving the degree. Course work begun before January 1, 1992, shall not be counted as part of the 30% requirement under this Section.
    - 3) The tuition reimbursement agreement that is executed pursuant to this Section may require the employee to provide written status reports on his/her progress toward receiving a post secondary degree.
    - 4) If the employee voluntarily leaves State employment prior to fulfilling this work commitment, the agency that paid the tuition may recover payments in addition to interest at the rate of 1% per month from the time the State makes the payment until the time the State recovers the payment.
    - 5) The amount owed by an employee shall be reduced by 25% for each year the employee works for the State after the employee receives a post secondary degree, or by 1/18th of the gross amount for each month the employee works for the State after completing the most recent course which does not lead to a post secondary degree.
    - 6) This Section may not be used as the basis for recovering payments for course work that was started before January 1, 1992; was completed as a requirement for a grammar school certificate or a high school diploma; was to prepare for a high school level General Educational Development Test or to improve literacy or numeracy; specialized training in the form of a conference, seminar, workshop or similar arrangement offered by public or private organizations; was provided as part of the Upward Mobility Program administered by the Department of Central Management Services; or was a condition of continued employment.



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(Source: Added at 19 Ill. Reg. 8130, effective  
JUN 07 1995)

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1) Heading of the Part: Merit and Fitness

2) Code Citation: 80 Ill. Adm. Code 302

3) Section Number: Adopted Action:

302.30 Amendment  
302.300 Amendment  
302.785 Amendment

4) Statutory Authority: Implementing and authorized by the Personnel Code [20 ILCS 415/8]; [20 ILCS 415/8b.7]; [20 ILCS 415/8b.15 and 415/8b.16]

5) Effective Date of Rules: June 7, 1995

6) Does this rulemaking contain an automatic repeal date? No

7) Do the Rules contain incorporations by reference? No

8) Date Filed in Agency's Principal Office: June 5, 1995

9) Notice of Proposal Published in Illinois Register:

March 10, 1995, 19 Ill. Reg. 2539

10) Has JCAR issued a Statement of Objections to the Amendments? No

11) Differences between proposal and final version:

Section 302.785. This section was edited extensively since the initial proposal.

Several minor editing changes were made.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes

13) Will the Rules replace an emergency rule currently in effect? No

14) Are there any amendments pending on this Part? No

15) Summary and Purpose of Rules:

Section 302.30. The amendments are intended to conform the existing rules with provisions in current law regarding veterans preference.

Section 302.300. The amendments will amend the probationary period for

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED AMENDMENTS

TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES  
SUBTITLE B: PERSONNEL RULES, PAY PLANS, AND  
POSITION CLASSIFICATIONS

CHAPTER I: DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

PART 302  
MERIT AND FITNESS

SUBPART A: APPLICATION AND EXAMINATION

Section	Examinations
302.10	Time, Place, Conduct, Cancellation, Postponement and Suspension of
302.20	Examinations
302.30	Veterans Preference
302.40	Announcement of Examination
302.52	Notice to Eligibles
302.55	Grading Examinations
302.60	Retaking or Regarding Examinations
302.70	Application and Eligibility

SUBPART B: APPOINTMENT AND SELECTION

Section	Eligible Lists
302.80	Appointments
302.90	Alternative Employment
302.91	Geographic Preference
302.100	Pre-Employment Screening
302.105	Appointment From Eligible List
302.110	Responsibilities of Eligibles
302.120	Removal of Names From Eligible Lists
302.130	Replacement of Names on Eligible List
302.140	Appointment and Status
302.150	Extension of Jurisdiction B
302.160	

SUBPART C: TRAINEES

Section	Programs
302.170	Appointments
302.175	Limitations on Trainee Appointments
302.180	

SUBPART D: CONTINUOUS SERVICE

Section	Definitions
302.190	Interruptions In Continuous Service
302.200	

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merit compensation employees consistent with the probationary period for collective bargaining employees.

Section 302.785. The amendments will result in conformity between the Personnel Rules and the collective bargaining agreement in situations where employees have been arrested or indicted. Under the proposal, agencies will be authorized to suspend such employees without pay pending the outcome of their criminal proceeding. Such authorization is consistent with current practices for collective bargaining employees.

16) Information and questions regarding this adopted rule shall be directed to:

Stephen W. Seiple  
720 Stratton Office Building  
Springfield, IL 62706  
(217)782-9669  
TDD (217)785-3979

The full text of the Adopted Amendments begins on the next page.



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302.210 Deductions From Continuous Service  
 302.215 Leave of Absence for Educational Purposes  
 302.220 Veterans Continuous Service  
 302.230 Peace or Job Corps Enrollees Continuous Service  
 302.240 Accrual and Retention of Continuous Service During Certain Leaves  
 302.250 Limitations on Continuous Service

## SUBPART E: PERFORMANCE REVIEW

Section  
 302.260 Performance Records  
 302.270 Performance Evaluation Forms

## SUBPART F: PROBATIONARY STATUS

Section  
 302.300 Probationary Period  
 302.310 Certified Status  
 302.320 Status Change in Probationary Period  
 302.325 Intermittent Status

## SUBPART G: PROMOTIONS

Section  
 302.330 Eligibility for Promotion  
 302.335 Limitations On Promotions  
 302.340 Failure to Complete Probationary Period

## SUBPART H: EMPLOYEE TRANSFERS

Section  
 302.400 Transfer  
 302.410 Intra-Agency Transfer  
 302.420 Inter-Agency Transfer  
 302.425 Merit System Transfer  
 302.430 Geographical Transfer (Agency Directed)  
 302.431 Geographical Transfer (Agency Directed) Procedures  
 302.432 Notice To Employee  
 302.433 Effective Date of Geographical Transfer (Agency Directed)  
 302.435 Employee-Requested Geographical Transfer  
 302.440 Rights of Transferred Employees  
 302.445 Transfer of Duties  
 302.450 Limitations on Transfers  
 302.460 Employee Records

## SUBPART I: DEMOTION

Section

## DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

## NOTICE OF ADOPTED AMENDMENTS

302.470 Demotion  
 302.480 Notice to Employee  
 302.490 Employee Obligations  
 302.495 Salary and Other Benefits of Employee  
 302.496 Appeal by Certified Employee  
 302.497 Demotion of Other Employees  
 302.498 Status of Demoted Employees

## SUBPART J: VOLUNTARY REDUCTION AND LAYOFFS

Section  
 302.500 Voluntary Reduction of Certified and Probationary Employees  
 302.505 Limitations in Voluntary Reduction  
 302.507 Definition of Layoff  
 302.510 Temporary Layoff  
 302.512 Use of Accrued Benefits During Temporary Layoff  
 302.514 Notice of Temporary Layoff  
 302.516 Return from Temporary Layoff  
 302.518 Scheduling for Temporary Layoffs  
 302.519 Deferral of Wages  
 302.520 Indeterminate Layoff Procedure  
 302.523 Voluntary Indeterminate Layoff  
 302.525 Disapproval  
 302.530 Order of Layoff  
 302.540 Effective Date of Layoff  
 302.550 Employee Opportunity to Seek Voluntary Reduction  
 302.560 Order of Preference in Voluntary Reduction  
 302.570 Reemployment Lists  
 302.580 Employment From Reemployment List  
 302.590 Removal of Names From Reemployment List  
 302.595 Laid Off Probationary Employee  
 302.596 Appeal by Employee  
 302.597 Reinstatement from Layoff  
 302.600 Resignation  
 302.610 Reinstatement

## SUBPART K: DISCHARGE AND DISCIPLINE

Section  
 302.625 Definition of Certified Employee  
 302.626 Progressive Corrective Discipline  
 302.628 Prohibited Disciplinary Action  
 302.630 Disciplinary Action Warning Notice  
 302.640 Suspension Totalling Not More Than Thirty Days in any Twelve Month Period

302.660 Suspension Totalling More than Thirty Days in any Twelve Month Period  
 302.670 Approval of Director of Central Management Services  
 302.680 Notice to Employee

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

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for a maximum of 150 days; amended at 9 Ill. Reg. 7907, effective May 15, 1985; amended at 10 Ill. Reg. 13940, effective September 1, 1986; amended at 12 Ill. Reg. 5634, effective March 15, 1988; emergency amendments at 12 Ill. Reg. 16214, effective September 23, 1988, for a maximum of 150 days; emergency expired February 20, 1989; amended at 13 Ill. Reg. 3722, effective March 13, 1989; amended at 13 Ill. Reg. 10820, effective June 23, 1989; amended at 13 Ill. Reg. 12970, effective August 1, 1989; amended at 15 Ill. Reg. 17974, effective November 27, 1991; amended at 16 Ill. Reg. 8375, effective May 21, 1992; emergency amendment at 16 Ill. Reg. 11645, effective July 6, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 13489, effective August 19, 1992; amended at 16 Ill. Reg. 17607, effective November 6, 1992; amended at 17 Ill. Reg. 3169, effective March 1, 1993; amended at 18 Ill. Reg. 1992, effective January 25, 1994; amended at 18 Ill. Reg. 17183, effective November 21, 1994; amended at 19 Ill. Reg. 8145, effective JUN 07 1995.

302.690 Employee Obligations  
302.700 Cause for Discharge  
302.705 Pre-Termination Hearing  
302.710 Suspension Pending Decision on Discharge  
302.720 Discharge of Certified Employee  
302.730 Notice to Employee  
302.750 Appeal by Employee  
302.780 Discharge of Probationary Employees  
302.781 Reinstatement from Suspension or Discharge  
302.785 Suspension ~~of~~ Change Resulting From Arrest or Criminal Indictment; Suspension Pending Judicial Verdict  
302.790 Prohibition of Discrimination

SUBPART L: TERM APPOINTMENTS

Section  
302.800 Definition of Terms  
302.810 Positions Subject to Term Appointments  
302.820 Appointment  
302.821 Effect of Loss of Federal Funding on Employees Excluded from Term Appointments by Reason of Being Federally Funded (Repealed)  
302.822 Appointees Under Term Appointments  
302.823 No Promotion to Positions Covered by Term Appointments (Repealed)  
302.824 No Reallocation to Term Positions  
302.825 Reemployment Rights to Term Appointment  
302.830 Expiration of Term Appointment  
302.840 Renewal Procedures  
302.841 Renewal Procedures for Incumbents on the Effective Date of Section 8b18 of the Personnel Code (Repealed)  
302.842 Effective Date of Reappointment or Termination (Repealed)  
302.846 Change in Position Factors Affecting Term Appointment Exclusion  
302.850 Reconsideration Request  
302.860 Renewal Procedure for Incumbents Subject to Public Act 83-1369  
302.863 Renewal of Certified or Probationary Incumbents in Exempted Positions

AUTHORITY: Implementing and authorized by the Personnel Code [20 ILCS 415].

SOURCE: Filed May 29, 1975; amended at 2 Ill. Reg. 33, p. 24, effective September 1, 1978; amended at 3 Ill. Reg. 1, p. 63, effective January 1, 1979; amended at 3 Ill. Reg. 22, p. 78, effective June 1, 1979; emergency amendment at 3 Ill. Reg. 48, p. 188, effective January 1, 1980, for a maximum of 150 days; emergency amendment at 4 Ill. Reg. 1, p. 76, effective January 1, 1980, for a maximum of 150 days; amended at 4 Ill. Reg. 11, p. 67, effective March 1, 1980; amended at 4 Ill. Reg. 15, p. 216, effective March 31, 1980; amended at 4 Ill. Reg. 22, p. 227, effective June 1, 1980; amended at 5 Ill. Reg. 8029, effective August 1, 1981; amended at 7 Ill. Reg. 654, effective January 5, 1983; codified at 7 Ill. Reg. 13198; amended at 8 Ill. Reg. 7788, effective May 23, 1984; emergency amendment at 9 Ill. Reg. 241, effective January 1, 1985,

SUBPART A: APPLICATION AND EXAMINATION

Section 302.30 Veterans Preference

a) Qualified--persons--who--have--passed--an--examination--and--who--have--been--members--of--the--armed--forces--of--the--United--States--in--times--of--hostilities--with--a--foreign--country--as--set--forth--in--Section--8b7--of--the--Personnel--Code--or--while--citizens--of--the--United--States--were--members--of--the--armed--forces--of--the--United--States--in--times--of--hostilities--with--a--foreign--country----shall--be--granted--preference--in--entrance--examinations:  
b) To--qualify--for--this--preference--a--person--must--have--served--in--the--armed--forces--for--at--least--6--months--or--have--been--discharged--on--the--ground--of--hardship--or--have--been--released--from--active--duty--because--of--a--service--connected--disability--and--not--have--received--a--dishonorable--discharge.  
c) Preference--in--entrance--examinations--will--be--granted--as--follows:  
1) Five--points--shall--be--added--to--the--entrance--examination--grade--for--such--non--disabled--veteran--eligibles.  
2) Ten--points--shall--be--added--to--the--entrance--examination--grade--for--such--veteran--eligibles--currently--receiving--compensation--from--the--United--States--Veterans--Administration--or--from--such--alien--country--for--war--service--connected--disabilities--ten--points--for--a--spouse--of--a--veteran--with--a--war--service--connected--disability--that--prevents--the--veteran--from--qualifying--for--civil--service--employment--the--first--parent--to--receive--a--civil--service--appointment--shall--be--the--parent--entitled--to--the--preference.  
3) If--category--ratings--are--used--the--veteran--eligibles--in--each--category--shall--be--preferred--for--appointment--before--the--non-veteran--eligibles--in--the--same--category.



## DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

## NOTICE OF ADOPTED AMENDMENTS

- a) Appropriate preference in entrance examinations shall be granted to qualified persons who have been members of the armed forces of the United States or to qualified persons who, while citizens of the United States, were members of the armed forces of allies of the United States in time of hostilities with a foreign country (as set forth in Section 8b7 of the Personnel Code) and to certain other persons as set forth in this Section.
- b) To be eligible, applicant must have received discharge under honorable conditions and served under one or more of the following conditions:
- 1) Served, for at least six months, in the armed forces of the United States, the Illinois National Guard, or any reserve component of the armed forces of the United States, or, while a U.S. citizen, must have been a member of the armed forces of an ally of the U.S. in time of hostilities with a foreign country;

or

- 2) Discharged on the grounds of hardship; or
- 3) Released from active duty because of a service connected disability; or
- 4) Served for the duration of hostilities regardless of the length of engagement.

- c) Preference will be in the form of points added to the final grades of persons who otherwise qualify and are entitled to appear on the list of those eligible for appointments. Preference in entrance examinations will be granted as follows:

- 1) Ten points shall be added to the entrance examination grade for such veteran eligibles currently holding proof of a service connected disability from the United States Veterans Administration or from such allied country for service connected disabilities or if the veteran is a purple heart recipient.
- 2) Five points shall be added to the entrance examination grade for such veteran eligibles who have served during a time of hostilities with a foreign country; who meet the qualifications set forth in subsection (b); but who do not qualify for 10 points under subsection (c)(1).
- 3) A person not eligible for a preference under subsection (c)(1) or (c)(2) is qualified for a preference of 3 points if the person has served in the armed forces of the United States, the Illinois National Guard, or any reserve component of the armed forces of the United States and the person:
  - A) served for at least 6 months and has been discharged under honorable conditions; or
  - B) has been discharged on the grounds of hardship; or
  - C) was released from active duty because of a service connected disability.

An active member of the National Guard or a reserve component of the armed forces of the United States is eligible for the preference if the member meets the service requirements of this subsection (3).

## DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

## NOTICE OF ADOPTED AMENDMENTS

- d) If category ratings are used, the veteran eligibles in each category shall be preferred for appointment before the non-veteran eligibles in the same category.
- e) A surviving unmarried spouse of a veteran who suffered a service connected death or the spouse of a veteran who suffered a service connected disability that prevents the veteran from qualifying for civil service employment shall be entitled to the same preference to which the veteran would have been entitled under this Section.
- f) A preference shall also be given to the following individuals: 10 points for one parent of an unmarried veteran who suffered a service connected death or a service connected disability that prevents the veteran from qualifying for civil service employment. The first parent to receive a civil service appointment shall be the parent entitled to the preference.

(Source: Amended at 19 Ill. Reg. 8145, effective JUN 07 1995)

## SUBPART F: PROBATIONARY STATUS

## Section 302.300 Probationary Period

- a) A probationary period of six months shall be served by
- 1) an employee who enters State service or commences a new period of continuous service,
  - 2) an employee who is reinstated as provided under Section 302.610,
  - 3) an employee who is appointed from an open competitive eligible list, whether or not it be considered an advancement in rank or grade.
- b) A probationary period of three four months shall be served by any employee who is promoted. An employee transferred during the probationary period shall serve that portion of the probationary period which was not completed at the time of such transfer.
- c) A probationary period shall not be deemed to be continued by the payment of any sum for vacation or other benefits accrued during such probationary period.
- d) If an employee is absent from work for more than 15 consecutive calendar days during the probationary period because of leave of absence, disciplinary suspension, sick leave, unauthorized absence, or work related injury or industrial disease, such absence shall serve to extend the probationary period by the length of the absence.

(Source: Amended at 19 Ill. Reg. 8145, effective JUN 07 1995)

## SUBPART K: DISCHARGE AND DISCIPLINE

Section 302.785 Suspension or Discharge Resulting From Arrest or Criminal

## DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

## NOTICE OF ADOPTED AMENDMENTS

Indictment/Suspension Pending Judicial Verdict

- a) The arrest or criminal indictment of any employee shall not be grounds for suspension if or discharge unless the arrest or indictment and facts in support of either made known to the Director:
- 1) resulted from an employee's conduct in the course of employment duties, including a failure to perform such duties, or
  - 2) occurred on or proximate to State premises and as a result of the employee's conduct thereon, or
  - 3) raises reasonable doubt concerning the employee's suitability for continued State employment in the present assignment or position.
- b) if an employee is not subject to suspension or discharge under subsection (a) above, the The Director shall under the circumstances set forth in subsection (c) below above, at the request of the employee an agency, place such suspend an employee on indefinite leave status, without pay, pending a final court determination of innocence or guilt.
- c) The following shall control the granting of a leave suspension pending judicial verdict:
- 1) An affected employee may be in jail, free on bond or in some other similar status at the time the leave is granted suspension is imposed.
  - 2) The arrest or indictment of an employee shall be for State or Federal criminal or civil charges, or charges brought in a foreign country, which raise reasonable doubt concerning the employee's suitability for continued employment in the current position. Traffic violations are not sufficient cause for this leave suspension except where the employee temporarily loses driving privileges if the license is a requirement for work as contained in the job description or position classification specification.
  - 3) Any proposed Leave Suspension Pending Judicial Verdict requires approval by the Agency head or designee and will include a complete and detailed statement of the reason(s) for the leave suspension and a copy of any official document, such as charges, indictment or arrest record, which supports the leave suspension.
  - 4) Such leave suspension shall have no designated expiration date, depending on the length of the initial judicial process. The suspension ends with the return of the employee to work, discharge or termination of employment. The Director shall notify the agency of the status of the leave suspension 12 months after the leave suspension is granted and each 12 months thereafter for the agency to determine the continuing validity of the leave suspension. This suspension will not be continued while the employee appeals an initial guilty verdict through higher courts.
  - 5) A leave suspension pending judicial verdict will be submitted to the Director for approval and service. The Director shall

## DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

## NOTICE OF ADOPTED AMENDMENTS

- approve any leave which complies with the criteria set forth in this subsection (c). An approved Leave Suspension Pending Judicial Verdict will be served on the employee in person or by certified mail, return receipt requested, to the employee's latest address of record. It will be the responsibility of the employee to notify the agency of any change of address.
- 6) Upon a finding of not guilty or the dismissal of the charges for any reason the employee, upon application, will be restored to the same or similar position classification in the agency and work location held at the time the leave suspension was granted issued. A similar position classification shall include:
- A) the same position classification with different duties;
  - B) a successor position classification; and or
  - C) a different position classification having related requirements and duties and the same salary or wage assignment.

- 7) The employee may or may not be entitled to back pay depending upon the circumstances surrounding a finding of not guilty or a dismissal of the charges. The Director shall make a final determination with respect to whether back pay shall be granted.

(Source: Amended at 19 Ill. Reg.  
JUN 07 1995 )

8145 , effective



## DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

## NOTICE OF ADOPTED AMENDMENTS

- 1) Heading of the Part: Pay Plan
- 2) Code Citation: 80 Ill. Adm. Code 310
- 3) Section Numbers: Adopted Action:  
310.230 Amended
- 4) Statutory Authority: Authorized by Section 8a.2 of the Personnel Code and 20 ILCS 415/8 and 8a.
- 5) Effective Date of Rulemaking: June 12, 1995
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? No
- 8) Date Filed in Agency's Principal Office: June 12, 1995
- 9) Notice of Proposal Published in Illinois Register: March 17, 1995, Issue #11, 19 Ill. Reg. 3122
- 10) Has JCAR issued a Statement of Objections to these rules? No
- 11) Difference(s) between proposal and final version: In Section 310.230, the new hourly and daily rates for the Office Aide, Office Assistant, Office Associate and Office Clerk titles which were recently adopted were incorporated within this amendment.
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes
- 13) Will this rulemaking replace an emergency rule currently in effect? No
- 14) Are there any amendments pending on this Part? Yes

<u>Section Numbers</u>	<u>Adopted Action</u>	<u>Illinois Register Citation</u>
310.110	Amended	19 Ill. Reg. 5165 (April 7, 199
310.130	Amended	19 Ill. Reg. 5165 (April 7, 199
310.Appendix B	Amended	19 Ill. Reg. 5165 (April 7, 199

- 15) Summary and Purpose of Rulemaking: In Section 310.230, Part-time Daily or Hourly Special Services Rate, the hourly rates of the Conservation/Historic Preservation Workers are being upgraded at the request of the Department of Conservation.

The part-time hourly salary for the Conservation/Historic Preservation

## DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

## NOTICE OF ADOPTED AMENDMENTS

Worker will be \$4.50 to 6.50; Conservation/Historic Preservation Worker (2nd season -- site interpretation) will be \$4.64 to 6.50; and Conservation/Historic Preservation Worker (3rd season -- site interpretation) will be \$4.78 to 6.50 per hour.

- 16) Information and questions regarding this adopted amendment shall be directed to:

Mr. Michael Murphy  
Department of Central Management Services  
Division of Technical Services  
504 William G. Stratton Building  
Springfield, IL 62706  
(217) 782-5601

The full text of the Adopted Amendment begins on the next page:

## DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

## NOTICE OF ADOPTED AMENDMENTS

TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES  
SUBTITLE B: PERSONNEL RULES, PAY PLANS, AND  
POSITION CLASSIFICATIONS

## CHAPTER I: DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

PART 310  
PAY PLAN

## SUBPART A: NARRATIVE

Section	
310.20	Policy and Responsibilities
310.30	Jurisdiction
310.40	Pay Schedules
310.50	Definitions
310.60	Conversion of Base Salary to Pay Period Units
310.70	Conversion of Base Salary to Daily or Hourly Equivalents
310.80	Increases in Pay
310.90	Decreases in Pay
310.100	Other Pay Provisions
310.110	Implementation of Pay Plan Changes for Fiscal Year 1995
310.120	Interpretation and Application of Pay Plan
310.130	Effective Date
310.140	Reinstitution of Within Grade Salary Increases
310.150	Fiscal Year 1985 Pay Changes in Schedule of Salary Grades, Effective July 1, 1984 (Repealed)

## SUBPART B: SCHEDULE OF RATES

Section	
310.205	Introduction
310.210	Prevailing Rate
310.220	Negotiated Rate
310.230	Part-Time Daily or Hourly Special Services Rate
310.240	Hourly Rate
310.250	Member, Patient and Inmate Rate
310.260	Trainee Rate
310.270	Legislated and Contracted Rate
310.280	Designated Rate
310.290	Out-of-State or Foreign Service Rate
310.300	Educator Schedule for RC-063 and HR-010
310.310	Physician Specialist Rate
310.320	Annual Compensation Ranges for Executive Director and Assistant Executive Director, State Board of Elections
310.330	Excluded Classes Rate (Repealed)

## SUBPART C: MERIT COMPENSATION SYSTEM

## DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

## NOTICE OF ADOPTED AMENDMENTS

Section	
310.410	Jurisdiction
310.420	Objectives
310.430	Responsibilities
310.440	Merit Compensation Salary Schedule
310.450	Procedures for Determining Annual Merit Increases
310.455	Intermittent Merit Increase
310.456	Merit Zone
310.460	Other Pay Increases
310.470	Adjustment
310.480	Decreases in Pay
310.490	Other Pay Provisions
310.495	Senior Public Service Administrator System
310.500	Definitions
310.510	Conversion of Base Salary to Pay Period Units
310.520	Conversion of Base Salary to Daily or Hourly Equivalents
310.530	Implementation
310.540	Annual Merit Increase Guidechart for Fiscal Year 1995
310.550	Fiscal Year 1985 Pay Changes in Merit Compensation System, effective July 1, 1984 (Repealed)

## APPENDIX A

TABLE A	Negotiated Rates of Pay HR-190 (Department of Central Management Services - State of Illinois Building - SEIU)
TABLE B	HR-200 (Department of Labor - Chicago, Illinois - SEIU)
TABLE C	RC-069 (Firefighters, AFSCME)
TABLE D	HR-001 (Teamsters Local #726)
TABLE E	RC-020 (Teamsters Local #330)
TABLE F	RC-019 (Teamsters Local #25)
TABLE G	RC-045 (Automotive Mechanics, IPPE)
TABLE H	RC-006 (Corrections Employees, AFSCME)
TABLE I	RC-009 (Institutional Employees, AFSCME)
TABLE J	RC-014 (Clerical Employees, AFSCME)
TABLE K	RC-023 (Registered Nurses, INA)
TABLE L	RC-008 (Boilermakers)
TABLE M	RC-110 (Conservation Police Lodge)
TABLE N	RC-010 (Professional Legal Unit, AFSCME)
TABLE O	RC-028 (Paraprofessional Human Services Employees, AFSCME)
TABLE P	RC-029 (Paraprofessional Investigatory and Law Enforcement Employees, IPPE)
TABLE Q	RC-033 (Meat Inspectors, IPPE)
TABLE R	RC-042 (Residual Maintenance Workers, AFSCME)
TABLE S	HR-012 (Fair Employment Practices Employees, SEIU)
TABLE T	HR-010 (Teachers of Deaf, IFT)
TABLE U	HR-010 (Teachers of Deaf, Extracurricular Paid Activities)
TABLE V	CU-500 (Corrections, Meet and Confer Employees)
TABLE W	RC-062 (Technical Employees, AFSCME)
TABLE X	RC-063 (Professional Employees, AFSCME)



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TABLE Y	RC-063 (Educators, AFSCME)
TABLE Z	RC-063 (Physicians, AFSCME)
APPENDIX B	Schedule of Salary Grades - Monthly and Annual Rates of Pay for Fiscal Year 1995
APPENDIX C	Medical Administrator Rates for Fiscal Year 1995
APPENDIX D	Merit Compensation System Salary Schedule for Fiscal Year 1995
APPENDIX E	Teaching Salary Schedule (Repealed)
APPENDIX F	Physician and Physician Specialist Salary Schedule (Repealed)
APPENDIX G	Public Service Administrator Class Series Salary Schedule

AUTHORITY: Implementing and authorized by Sections 8 and 8a of the Personnel Code [20 ILCS 415/8 and 8a].

SOURCE: Filed June 28, 1967; codified at 8 Ill. Reg. 1558; emergency amendment at 8 Ill. Reg. 1990, effective January 31, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 2440, effective February 15, 1984; emergency amendment at 8 Ill. Reg. 3348, effective March 5, 1984, for a maximum of 150 days; emergency amendment at 8 Ill. Reg. 4249, effective March 16, 1984, for a maximum of 150 days; emergency amendment at 8 Ill. Reg. 5704, effective April 16, 1984, for a maximum of 150 days; emergency amendment at 8 Ill. Reg. 7290, effective May 11, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 11299, effective June 25, 1984; emergency amendment at 8 Ill. Reg. 12616, effective July 1, 1984, for a maximum of 150 days; emergency amendment at 8 Ill. Reg. 15007, effective August 6, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 15367, effective August 13, 1984; emergency amendment at 8 Ill. Reg. 21310, effective October 10, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 21544, effective October 24, 1984; amended at 8 Ill. Reg. 22844, effective November 14, 1984; emergency amendment at 9 Ill. Reg. 1134, effective January 16, 1985, for a maximum of 150 days; amended at 9 Ill. Reg. 1320, effective January 23, 1985; amended at 9 Ill. Reg. 3681, effective March 12, 1985; emergency amendment at 9 Ill. Reg. 4163, effective March 15, 1985, for a maximum of 150 days; emergency amendment at 9 Ill. Reg. 9231, effective May 31, 1985, for a maximum of 150 days; amended at 9 Ill. Reg. 9420, effective June 7, 1985; amended at 9 Ill. Reg. 10663, effective July 1, 1985; emergency amendment at 9 Ill. Reg. 15043, effective September 24, 1985, for a maximum of 150 days; emergency amendment at 10 Ill. Reg. 3125, effective January 22, 1986; amended at 10 Ill. Reg. 3230, effective January 24, 1986; emergency amendment at 10 Ill. Reg. 8904, effective May 13, 1986, for a maximum of 150 days; emergency amendment at 10 Ill. Reg. 8928, effective May 13, 1986; emergency amendment at 10 Ill. Reg. 12090, effective June 30, 1986, for a maximum of 150 days; emergency amendment at 10 Ill. Reg. 13675, effective July 31, 1986; emergency amendment at 10 Ill. Reg. 14867, effective August 26, 1986; amended at 10 Ill. Reg. 15567, effective September 17, 1986; emergency amendment at 10 Ill. Reg. 17665, effective September 30, 1986, for a maximum of 150 days; emergency amendment at 10 Ill. Reg. 19132, effective October 28, 1986; emergency amendment at 10 Ill. Reg. 21097, effective December 9, 1986; amended at 11 Ill. Reg. 648, effective December 22, 1986; emergency amendment at 11 Ill. Reg. 3363, effective February 3, 1987; emergency amendment at 11 Ill. Reg. 4388,

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effective February 27, 1987; emergency amendment at 11 Ill. Reg. 6291, effective March 23, 1987; amended at 11 Ill. Reg. 5901, effective March 24, 1987; emergency amendment at 11 Ill. Reg. 8787, effective April 15, 1987, for a maximum of 150 days; emergency amendment at 11 Ill. Reg. 11830, effective July 1, 1987, for a maximum of 150 days; emergency amendment at 11 Ill. Reg. 13675, effective July 29, 1987; amended at 11 Ill. Reg. 14984, effective August 27, 1987; emergency amendment at 11 Ill. Reg. 15273, effective September 1, 1987; emergency amendment at 11 Ill. Reg. 17919, effective October 19, 1987; emergency amendment at 11 Ill. Reg. 19812, effective November 19, 1987; emergency amendment at 11 Ill. Reg. 20664, effective December 4, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 20778, effective December 11, 1987; emergency amendment at 12 Ill. Reg. 3811, effective January 27, 1988; emergency amendment at 12 Ill. Reg. 5459, effective March 3, 1988; amended at 12 Ill. Reg. 6073, effective March 21, 1988; emergency amendment at 12 Ill. Reg. 7783, effective April 14, 1988; emergency amendment at 12 Ill. Reg. 7734, effective April 15, 1988, for a maximum of 150 days; emergency amendment at 12 Ill. Reg. 8135, effective April 22, 1988; emergency amendment at 12 Ill. Reg. 9745, effective May 23, 1988; emergency amendment at 12 Ill. Reg. 11778, effective July 1, 1988, for a maximum of 150 days; emergency amendment at 12 Ill. Reg. 12895, effective July 18, 1988, for a maximum of 150 days; emergency amendment at 12 Ill. Reg. 13306, effective July 27, 1988; corrected at 12 Ill. Reg. 13359; amended at 12 Ill. Reg. 14630, effective September 6, 1988; amended at 12 Ill. Reg. 20449, effective November 28, 1988; emergency amendment at 12 Ill. Reg. 20584, effective November 28, 1988; emergency amendment at 13 Ill. Reg. 8080, effective May 10, 1989; amended at 13 Ill. Reg. 8849, effective May 30, 1989; emergency amendment at 13 Ill. Reg. 10967, effective June 20, 1989, for a maximum of 150 days; emergency amendment expired on November 17, 1989; amended at 13 Ill. Reg. 11451, effective June 28, 1989; emergency amendment at 13 Ill. Reg. 11854, effective July 1, 1989, for a maximum of 150 days; corrected at 13 Ill. Reg. 12647; emergency amendment at 13 Ill. Reg. 12887, effective July 24, 1989; amended at 13 Ill. Reg. 16950, effective October 20, 1989; amended at 13 Ill. Reg. 19221, effective December 12, 1989; amended at 14 Ill. Reg. 615, effective January 2, 1990; emergency amendment at 14 Ill. Reg. 1627, effective January 11, 1990; amended at 14 Ill. Reg. 4455, effective March 12, 1990; emergency amendment at 14 Ill. Reg. 7652, effective May 7, 1990; amended at 14 Ill. Reg. 10002, effective June 11, 1990; emergency amendment at 14 Ill. Reg. 11330, effective June 29, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 14361, effective August 24, 1990; emergency amendment at 14 Ill. Reg. 15570, effective September 11, 1990, for a maximum of 150 days; emergency amendment expired on February 8, 1991; corrected at 14 Ill. Reg. 16092; emergency amendment at 14 Ill. Reg. 17098, effective September 26, 1990; emergency amendment at 14 Ill. Reg. 17189, effective October 2, 1990; amended at 14 Ill. Reg. 17189, effective October 19, 1990; amended at 14 Ill. Reg. 18719, effective November 13, 1990; emergency amendment at 14 Ill. Reg. 18854, effective November 13, 1990; emergency amendment at 15 Ill. Reg. 663, effective January 7, 1991; amended at 15 Ill. Reg. 3296, effective February 14, 1991; amended at 15 Ill. Reg. 4401, effective March 11, 1991; emergency

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amendment at 15 Ill. Reg. 5100, effective March 20, 1991; peremptory amendment at 15 Ill. Reg. 5465, effective April 2, 1991; emergency amendment at 15 Ill. Reg. 10485, effective July 1, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 11080, effective July 19, 1991; amended at 15 Ill. Reg. 13080, effective August 21, 1991; amended at 15 Ill. Reg. 14210, effective September 23, 1991; emergency amendment at 16 Ill. Reg. 711, effective December 26, 1991, for a maximum of 150 days; amended at 16 Ill. Reg. 3450, effective February 20, 1992; peremptory amendment at 16 Ill. Reg. 5068, effective March 11, 1992; peremptory amendment at 16 Ill. Reg. 7056, effective April 20, 1992; emergency amendment at 16 Ill. Reg. 8239, effective May 19, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 8382, effective May 26, 1992; emergency amendment at 16 Ill. Reg. 13950, effective August 19, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 14452, effective September 4, 1992, for a maximum of 150 days; amended at 17 Ill. Reg. 238, effective December 23, 1992; peremptory amendment at 17 Ill. Reg. 498, effective December 18, 1992; amended at 17 Ill. Reg. 590, effective January 4, 1993; amended at 17 Ill. Reg. 1819, effective February 2, 1993; amended at 17 Ill. Reg. 6441, effective April 8, 1993; emergency amendment at 17 Ill. Reg. 12900, effective July 22, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 13409, effective July 29, 1993; emergency amendment at 17 Ill. Reg. 13789, effective August 9, 1993, for a maximum of 150 days; emergency amendment at 17 Ill. Reg. 14666, effective August 26, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 19103, effective October 25, 1993; emergency amendment at 17 Ill. Reg. 21858, effective December 1, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 22514, effective December 15, 1993; amended at 18 Ill. Reg. 227, effective December 17, 1993; amended at 18 Ill. Reg. 1107, effective January 18, 1994; amended at 18 Ill. Reg. 5146, effective March 21, 1994; peremptory amendment at 18 Ill. Reg. 9562, effective June 13, 1994; emergency amendment at 18 Ill. Reg. 11299, effective July 1, 1994, for a maximum of 150 days; peremptory amendment at 18 Ill. Reg. 13476, effective August 17, 1994; emergency amendment at 18 Ill. Reg. 14417, effective September 9, 1994, for a maximum of 150 days; amended at 18 Ill. Reg. 16545, effective October 28, 1994; peremptory amendment at 18 Ill. Reg. 16708, effective October 28, 1994; amended at 18 Ill. Reg. 17191, effective November 21, 1994; amended at 19 Ill. Reg. 1024, effective January 24, 1995; peremptory amendment at 19 Ill. Reg. 2481, effective February 17, 1995; peremptory amendment at 19 Ill. Reg. 3073, effective February 17, 1995; amended at 19 Ill. Reg. 3456, effective March 7, 1995; peremptory amendment at 19 Ill. Reg. 5145, effective March 14, 1995; amended at 19 Ill. Reg. 6452, effective May 2, 1995; peremptory amendment at 19 Ill. Reg. 6688, effective May 1, 1995; amended at 19 Ill. Reg. 7841, effective June 1, 1995; amended at 19 Ill. Reg. 8156, effective JUN 12 1995.

## SUBPART B: SCHEDULE OF RATES

## Section 310.230 Part-Time Daily or Hourly Special Services Rate

The rate of pay as approved by the Director of Central Management Services for persons employed on a consultative or part-time basis requiring irregular hours

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of work shall be as listed below, except the total compensation of an employee in any given month shall not exceed the monthly rate of Step 5 of the salary grade for the title as shown in the Schedule of Salary Grades (Appendix B) of this Part if the class title is subject to the Schedule of Salary Grades, or Step 5 of the negotiated salary range for classes of positions shown in Section 310.220, Subpart B, Schedule of Rates, or 75% of the maximum rate of those classes of positions subject to the provisions of the Merit Compensation System, Subpart C of this Pay Plan.

Account Technician II	11.00 to 14.08 (hourly)
Apiary Inspector	83 to 106 (daily)
Building/Grounds Laborer	32 to 50
Building/Grounds Lead I	4.25 to 6.00 (per hour)
Building/Grounds Lead II	4.25 to 7.00 (per hour)
Building/Grounds Maintenance Worker	5.25 to 8.00 (per hour)
Chaplain I	5.00 to 6.00 (per hour)
Chemist I	32 to 70
Conservation/Historic Preservation Worker	32 to 45
Conservation/Historic Preservation Worker (2nd season -- site interpretation)	<del>4:50-tper-hour</del> 4.50 to 6.50 (hourly)
Conservation/Historic Preservation Worker (3rd season -- site interpretation)	<del>4:64-tper-hour</del> 4.64 to 6.50 (hourly)
Dentist I	<del>4:78-tper-hour</del> 4.78 to 6.50 (hourly)
Dentist II	70 to 150
Educator Aide	100 to 185
Guard II	32 to 60
Guard III	32 to 35
Hearing and Speech Coordinator	67 to 84
Hearings Referee	75 to 96
Janitor I	15 to 30 (per hour)
Labor Maintenance Lead Worker	75 to 200
Labor Relations Investigator	4.73 to 5.30 (per hour)
Laborer (Maintenance)	5.00 to 6.00 (per hour)
Maintenance Worker	35 to 70
Occupational Therapist	4.25 to 5.70 (per hour)
Program Coordinator	4.25 to 5.00 (per hour)
Office Aid	40 to 160
Office Assistant	4.25 to 9.34 (hourly)
Office Associate	42 to 70 (daily)
Office Clerk	4.25 to 10.78 (hourly)
	42 to 81 (daily)
	4.25 to 11.71 (hourly)
	42 to 88 (daily)
	4.25 to 10.01 (hourly)



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Optometrist	61 to 75 (daily)
Optometrist	50 to 160 (daily)
Physician	15 to 35 (hourly)
Physician	100 to 300
Physician Specialist (A)	100 to 325 (daily)
Physician Specialist (A)	20 to 60 (hourly)
Physician Specialist (B)	100 to 350 (daily)
Physician Specialist (B)	20 to 70 (hourly)
Physician Specialist (C)	100 to 360 (daily)
Physician Specialist (C)	20 to 75 (hourly)
Physician Specialist (D)	100 to 370 (daily)
Physician Specialist (D)	20 to 85 (hourly)
Podiatrist	20 to 125
Psychologist I	35 to 80
Psychologist II	40 to 125
Psychologist III	40 to 150
Recreation Worker I	32 to 40
Recreation Worker I	5.33 (per hour)
Registered Nurse I	39 to 54
Registered Nurse I	41 to 56
(2nd or 3rd shift)	
Registered Nurse I (Cook County)	43 to 58
Registered Nurse I (Cook County -	44 to 59
2nd or 3rd shift)	
Registered Nurse II	43 to 58
Registered Nurse II	44 to 59
(2nd or 3rd shift)	
Registered Nurse II (Cook County)	45 to 60
Registered Nurse II (Cook County -	47 to 62
2nd or 3rd shift)	
Social Worker II	35 to 75
Social Worker III	35 to 80
Student Worker	4.25 to 8.00 (per hour)
Tax Examiner	9.69 to 12.21 (hourly)
Technical Advisor II	73 to 92 (daily)
Technical Advisor III	32 to 35 (per hour)
Technical Advisor IV	32 to 60 (per hour)
Veterinarian II	50 to 80 (per hour)
	95 to 130 (daily)

(Source: Amended at 19 Ill. Reg. 8156, effective JUN 12 1995)

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- 1) Heading of the Part: Discipline and Behavior Management in Child Care Facilities
- 2) Code Citation: 89 Ill. Adm. Code 384
- 3) Section Numbers: Adopted Action:
  - 384.1 Renumber, Amend
  - 384.2 Renumber, Amend
  - 384.3 Renumber, Amend
  - 384.4 Renumber, Amend
  - 384.5 Repeal
  - 384.50 New Section
  - 384.60 New Section
  - 384.70 New Section
  - 384.80 New Section
  - 384.90 New Section
  - 384.100 New Section
  - 384.110 New Section
  - 384.120 New Section
- 4) Statutory Authority: Implementing and authorized by the Child Care Act of 1969 [225 ILCS 10]
- 5) Effective Date of Amendments: June 9, 1995
- 6) Does this rulemaking contain an automatic repeal date? No.
- 7) Do these amendments contain incorporations by reference? No.
- 8) Date filed in Agency's Principal Office: June 9, 1995
- 9) Notice of Proposal Published in Illinois Register:
  - 18 Ill. Reg. 8528 June 10, 1994
- 10) Has JCAR issued a Statement of Objections to these rules? No.
- 11) Difference between proposal and final version:

In addition to many editing and formatting changes, the following revisions have been made:

  1. Section 384.10 (a) was revised to read as follows:
    - a) The purpose of this part is to explain the disciplinary measures which are acceptable in child-care facilities, other than foster family--and--day--care--homes--as--well--as--those--which--are--not

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acceptable behavior intervention measures which are acceptable and ~~prohibit those which are not acceptable~~ to identify those behavior intervention techniques which are prohibited. In addition, the use of behavior management techniques are explained and limited.

2. Section 384.10 (b) was revised as follows:

b) This Part applies to the following types of facilities licensed by the Department of Children and Family Services: child care institutions, group homes, ~~treatment-foster-family-homes~~, and youth emergency shelters (as restricted by 89 Ill. Adm. Code 410, Licensing Standards for Youth Emergency Shelters). No other facility licensed by the Department is authorized to use physical restraint or confinement unless a behavior intervention plan allowing physical restraint or confinement has been approved by the Department in accordance with the provisions of this Part or is specifically allowed by the applicable licensing standards.

3. In Section 384.20, Definitions, these changes were made to the following definitions:

"Approved crisis intervention procedures" are those procedures approved by the Department of Children and Family Services and the governing body of the child care facility. The procedures are taught as part of ~~mandated-staff~~ mandatory training expressly for use in responding to emergency situations when a child presents dangerous behavior which could not have been anticipated, ~~or--the~~ and the procedures specified in the child's current individualized treatment ~~program-is~~ Plan are not successfully controlling the presented dangerous behavior.

"Approved written behavioral intervention program" was deleted.

"Behavior management techniques" was revised to read "Behavior management techniques" are techniques which prevent or limit an individual's ability to initiate or continue presenting some specific ~~harmful-actions~~ dangerous behaviors. Behavior management techniques include ~~including~~ physical restraint, confinement, the use of psychotropic drugs, secure residential care, and other restrictive procedures approved in compliance with the requirements of Section 384.60.

"Behavior Treatment Committee" was revised to read "Behavior Treatment Committee" means a professional review or behavior management committee formed by one or more child care facilities and composed of persons with technical expertise in the use of crisis

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intervention, behavior intervention, and behavior management techniques ~~behavioral-technology~~. At least 20% of the committee must be persons who have no professional or financial interest in any of the participating child care facilities. This committee reviews which technical merit acceptability all intervention procedures which involve the systematic application of behavioral technology. This would include determining whether or not there is a clinical basis for the use of the procedure, whether a procedure of this level is warranted ~~in-the-particular-case~~, and what is the standard of best clinical practice.

"Child care facility" was revised by deleting "treatment foster family homes" from the definition.

"Dangerous behavior" was added to Section 384.20 as follows:

"Dangerous behavior" means behavior which is likely to result in harm to self or others, if not immediately contained.

"Human Rights Committee" was amended by adding the following language in the first line immediately after "persons": ", at least one of whom is an attorney who understands mental health law and who is not affiliated in any way with the participating child care facilities. Human rights committees may be". A period has been placed after "facilities" and a new sentence formed by adding "Human rights committees" before "are charged".

"Immediately" was added to Section 384.20 as follows:

"Immediately", as it relates to the reporting requirements of this Part, means as quickly as possible after appropriate medical care has been obtained, but no longer than 24 hours after the incident in all cases.

"Individual treatment plan" was added to the definitions as follows:

"Individual treatment plan" means the current behavior intervention and treatment program for a specific child that has been prepared by an interdisciplinary team which may include, but is not limited to, the DCS caseworker, private agency/institution caseworker, therapist or psychiatrist, and foster parents.

"Mental health professional (MHP)" replaces the definition of "Qualified clinical professional", which was deleted, as follows:

"Mental health professional (MHP)" means a person who possesses a bachelor's degree, a practical nurse license pursuant to the Illinois Nursing Act of 1987 [225 ILCS 65], or who has a minimum of five years



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supervised experience in mental health or human services. The mental health professional responsible for making clinical decisions regarding the use of physical restraint, confinement, or other restrictive behavior management techniques shall have completed at least 15 clock hours of training in the application of the specific behavior management techniques used by the facility.

"Momentary" was added to the definitions as follows:

"Momentary" means lasting a Brief time, not to exceed five minutes.

"Physical restraint" was revised by deleting "finger" and by adding "Section" immediately prior to former "384.70" renumbered to "384.60".

"Physical restriction" was revised by adding to the last sentence the words "or to transport a child to a quieter environment".

"Self-governance program" was revised by adding the following second sentence: Self-governance programs shall be restricted to programs identified and recognized by the Illinois Association of Peer Treatment Agencies and the Department of Children and Family Services as using a peer group treatment model.

"Treatment foster family home" was deleted from the definitions.

4. Section 384.30, Effective Date of this Part, was deleted.

5. Section 384.40, Use of Discipline, was renumbered to 384.30 and further revised as follows:

(b) The last sentence beginning "The rules shall be written" was deleted and a new last sentence added which reads: The rules shall be explained orally in the child's primary language and a written copy given to each child at the time the child is admitted to the facility.

(c) A new subsection (c) was added, which reads: Each staff member shall receive training in the rules of the child care facility and shall be given a written copy of the rules prior to starting active service.

Former subsection (c) was relabeled to (d); and subsection (3) was amended by changing "the child shall have the reasons... explained" to "the reasons ... shall be explained to the child"; subsection (4) was revised by deleting "his or her" throughout the subsection line; deleting "all" in the first sentence; changing "hours of" to "hours after"; and adding a last sentence which reads: If the administrator

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or designee disapproves of the discipline imposed, the administrator or designee shall state the reasons for disapproval and shall correct the use of improper disciplinary techniques.

Former subsection (d) was changed to (e). In that subsection the first two subsections (1) and (2) were deleted and the following subsections (3), (4), (5), (6) and (7) were renumbered to (1), (2), (3), (4) and (5).

In the renumbered (3), "for a maximum of one week" was deleted.

In subsection (B) add (i) before "When a child's" and indent appropriately. Add a second sentence which reads: The facility shall keep complete records of all spending money which was withheld and any payments to the child.

After (i) add (ii) which reads: If a child fails to earn back the spending money before his or her discharge from the facility, the withheld spending money must be given to the child's parent or guardian.

In subsection (4) (formerly (6)) "one (1) hour" was replaced by "three (3) hours per day".

6. Section 384.50, Limitations of Discipline, was renumbered to 384.40 and further revised as follows:

(a) At the end of the sentence "learning" was deleted and replaced by "facility or child care staff learn".

(b) Change "384.100" to "384.90".

(c) A new subsection (c) was added which reads "No child shall be subjected to group discipline because of the misbehavior of another member of the group unless group discipline is part of an approved self-governance program under Section 384.90."

The remaining subsections (c) through (r) were relabeled to (d) through (s).

(d) The strikeout was removed from the words "under any circumstances".

(e) The strikeout was removed from the words "under any circumstances".

(f) "Special treats" was changed to "special between-meal treats".

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- (i) The strikethrough was removed from "under any circumstances".
- (n) The words "as discipline" were deleted from the end of the sentence.
- (r) The words "as discipline." were added after "techniques" and the words "except as provided in" were deleted. A second sentence was formed to read "See Sections 384.50 - 384.100."
- (s) The words "under any circumstances" were added after "punishment".
7. Section 384.60, Behavior Intervention Plans in Child Care Facilities, was renumbered to 384.50 and further revised as follows:
- In the first paragraph the words "contract with" were replaced by "accept children for whom" and the words "is legally responsible" were added after "Services".
- (b) In the third sentence "plan" was changed to "plans" and "within 180 days of the adoption of this part" was changed to "by January 1, 1996."; the next sentence was rewritten to read "Behavior intervention plans shall not be implemented until approval by the Department has been obtained."; in the last sentence "of" was changed to "after".
- (c)(5) The word "guidelines" was changed to "procedures".
- (d) The word "behavioral" was changed to "behavior" throughout this Section.
- (e)(2) To the last sentence were added the following words "and at least once per quarter as part of a treatment review."
- (e)(3) The word "approving" was deleted.
- (e)(4) "Identify" was replaced by "identifying".
- (e)(5) The words "for review" were added to the end of the sentence.
- (e)(8) "or" was replaced by "and".
- (f)(3) The words "under staffing, inconsistencies in programming, or" were deleted.
8. Section 384.70, Physical Restraints, was renumbered to 384.60 and further revised as follows:

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- In the first paragraph "only" was deleted and after "used" the words "only as a therapeutic measure" were added; in the second sentence "destructive" was replaced by "dangerous"; in the fourth sentence "treatment plan" was deleted and ", as documented in the child's individual treatment plan" was added to the end of the sentence.
- In subsections (a) through (m) the first word of each subsection was capitalized.
- Move subsection (k) and (l) to after subsection (c).
- (d) and (e) have been relettered to (f) through (g) and a new (h) added which reads:
- (h) When physical restraint is imposed upon any child whose primary mode of communication is sign language, the child shall be permitted to have his or her hands free from restraint for brief periods during the restraint, except when such freedom may result in physical harm to the child or others.
- (f) through (i) have been relettered to (i) through (l) with changes in those subsections as follows:
- (i) The words "criterion referenced" were deleted in both places where they appeared; in the third sentence after "certification" the words "of competency" were added; in the last sentence "individualized", "analog", and "and devices" were deleted.
- (j) In the first sentence the words "qualified clinical" were replaced by "mental health"; in the second sentence "present" was inserted after "remain"; in the third sentence "or" was replaced by "and"; in the last sentence "medical personnel" replaced "a physician".
- (k) In the last sentence the words "child care" were deleted.
9. Sections 384.80 through 384.130 were renumbered through 384.70 through 384.130 respectively.
10. Renumbered Section 384.90, Self-Governance Programs, delete subsection (f) in its entirety.
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes.
- 13) Will these proposed amendments replace an emergency rule currently in effect? No.



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14) Are there any amendments pending on this Part? No.

15) Summary and Purpose of These Adopted Amendments: The use of discipline and behavior management in child care facilities licensed by the Department of Children and Family Services was one of those areas which the B.H. Consent Decree required to be studied by a Reform Panel composed of experts. In accordance with the provisions of the Consent Decree, the Restraint, Seclusion, and Administration of Psychotropic Medications Reform Panel was formed. This highly qualified panel was composed of legal, clinical, and professional staff who deliberated for nearly one year on the matters before it. The Reform Panel released a comprehensive report on its findings, which are reflected to a very large extent in the amendments to this Part and proposed new rules 89 Ill. Adm. Code 325, Administration of Psychotropic Medications to Children for Whom DCFS is Legally Responsible, which the Department will be adopting shortly.

16) Information and questions regarding these adopted amendments shall be directed to:

Jacqueline Nottingham, Chief  
Office of Rules and Procedures  
Department of Children and Family Services  
406 East Monroe Street, Station # 222  
Springfield, Illinois 62701-1498

17) The full text of the adopted amendments is as follows:

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TITLE 89: SOCIAL SERVICES  
CHAPTER III: DEPARTMENT OF CHILDREN AND FAMILY SERVICES  
SUBCHAPTER d: LICENSING ADMINISTRATION

## PART 384

## DISCIPLINE AND BEHAVIOR MANAGEMENT IN CHILD CARE FACILITIES

Section	Purpose
384.110	Definitions
384.220	Use of Discipline
384.330	Limitations of Discipline
384.440	Behavior Management Techniques (Repealed)
384.5	Behavior Interventions Plan in Child Care Facilities
384.60	Physical Restraints
384.70	Mechanical Restraints
384.80	Confinement
384.90	Self-Governance Programs
384.100	Secure Residential Care
384.110	Reports
384.120	Severability of this Part

AUTHORITY: Implementing and authorized by the Child Care Act of 1969 [225 ILCS 10].

SOURCE: Adopted and codified at 6 Ill. Reg. 13713, effective Nov. 15, 1982; emergency amendments at 18 Ill. Reg. 8474, effective May 20, 1994, for a maximum of 150 days; emergency expired October 17, 1994; amended at 19 Ill. Reg. 8165, effective JUN 09 1995.

## Section 384.110 Purpose

a) The purpose of this Part part is to explain the disciplinary measures which are acceptable in child-care facilities, other than foster family-and-day-care-homes-as-well-as-those-which-are-not-acceptable- behavior intervention measures which are acceptable and to identify those behavior intervention techniques which are prohibited. In addition, the use of behavior management techniques are explained and limited.

b) This Part applies to the following types of facilities licensed by the Department of Children and Family Services: child care institutions, group homes, and youth emergency shelters (as restricted by 89 Ill. Adm. Code 410, Licensing Standards for Youth Emergency Shelters). No other facility licensed by the Department is authorized to use physical restraint or confinement unless a behavior intervention plan allowing physical restraint or confinement has been approved by the Department in accordance with the provisions of this Part or is specifically allowed by the applicable licensing standards.

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(Source: Section 384.10 renumbered from Section 384.1 and amended at 19 Ill. Reg. **8165**, effective **JUN 9 1995**)

## Section 384.220 Definitions

"Approved crisis intervention procedures" are those procedures approved by the Department of Children and Family Services and the governing body of the child care facility. The procedures are taught as part of mandatory training expressly for use in responding to emergency situations when a child presents dangerous behavior which could not have been anticipated, and the procedures specified in the child's current individual treatment plan are not successfully controlling the dangerous behavior.

"Behavior intervention techniques" refers to the systematic application of the principles of human learning as a means of influencing an individual's conduct by methods which have been approved in compliance with the requirements set forth in Section 384.50.

"Behavior management techniques" means the use of physical restraints, confinement, drugs, secure residential care or other procedures approved in compliance with the detailed requirements set forth in Section 384.50 are techniques which prevent or limit an individual's ability to initiate or continue presenting some specific dangerous behaviors. Behavior management techniques include physical restraint, confinement, the use of psychotropic drugs, secure residential care, and other restrictive procedures approved in compliance with the requirements of Section 384.50.

"Behavior Treatment Committee" means a professional review or behavior management committee formed by one or more child care facilities and composed of persons with technical expertise in the use of crisis intervention, behavior intervention, and behavior management techniques. At least 20% of the committee must be persons who have no professional or financial interest in any of the participating child care facilities. This committee reviews for technical acceptability all intervention procedures which involve the systematic application of behavioral technology. This would include determining whether there is a clinical basis for the use of the procedure, whether a procedure of this level is warranted, and what is the standard of best clinical practice.

"Child care facility" means any person, group of persons, agency, association or organization which arranges for or cares for children unrelated to the operator of the facility, apart from the parents. Child care facilities may be established for profit or not for profit. Child care facility is further defined in the Child Care Act.

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"Child care facility", as used in this Part, means a child care institution, group home, youth emergency shelter (as restricted by 89 Ill. Adm. Code 410, Licensing Standards for Youth Emergency Shelters) or any other facility approved by the Department to use physical restraint or confinement.

"Confinement" means physically isolating and separating a child from the rest of the children in a specifically designated room, or a "time-out room", in order to allow a child to regain his self-control when the child's behavior is such that the technique is necessary to prevent physical harm to the child or others or damage to property.

"Confinement" means isolating a child alone in a specifically designated room to assist the child in regaining self-control, subject to the detailed requirements of Section 384.80.

"Dangerous behavior" means behavior which is likely to result in harm to self or others, if not immediately contained.

"Department" means the Department of Children and Family Services.

"Developmental disability" means a disability which is attributable to mental retardation, cerebral palsy, epilepsy or autism; or any other condition which results in impairment similar to that caused by mental retardation and which requires services similar to those required by mentally retarded persons. Such disability must originate before the age of 18 years, be expected to continue indefinitely, and constitute a substantial handicap.

"Discipline" means a method of dealing with infractions of the child care facility.

"Discipline" means providing specific consequences for infractions of the rules of a child care facility as a means of helping children both to develop self-control and to learn they are responsible for their actions.

"Human Rights Committee" means a group of three or more persons, at least one of whom is an attorney who understands mental health law and who is not affiliated in any way with the participating child care facilities. Human rights committees may be formed by one or more child care facilities. Human rights committees are charged with assuring that children's rights are protected. The committee is responsible for reviewing intrusive or restrictive behavioral procedures to assure, among other things, that informed consent has been obtained, that due process is followed, that services are provided consistent with the least restrictive environment, and to broadly reflect community standards for conduct.



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"Immediately", as it relates to the reporting requirements of this Part, means as quickly as possible after appropriate medical care has been obtained, but no longer than 24 hours after the incident in all cases.

"Individual treatment plan" means the current behavior intervention and treatment program for a specific child that has been prepared by an interdisciplinary team which may include, but is not limited to, the DCFS caseworker, private agency/institution caseworker, therapists or psychiatrist, and foster parents.

"Mechanical restraint", as used in this Part, means any device, other than personal physical force, used to directly restrict the limbs, head or body of a person. The term does not include any medically prescribed procedure for the treatment of an existing physical disorder or the amelioration of a physical handicap; nor does the term include a device used for the partial or total immobilization of a person for the purpose of performing a medical/surgical procedure under the supervision of a licensed physician or registered nurse.

"Mental health professional (MHP)" means a person who possesses a bachelor's degree, a practical nurse license pursuant to the Illinois Nursing Act of 1987 (225 ILCS 65), or who has a minimum of five years supervised experience in mental health or human services. The mental health professional responsible for making clinical decisions regarding the use of physical restraint, confinement, or other restrictive behavior management techniques shall have completed at least 15 clock hours of training in the application of the specific behavior management techniques used by the facility.

"Momentary" means lasting a brief time, not to exceed five minutes.

"Physical restraint" means a behavior management technique involving the use of ~~the minimum amount of~~ physical contact or force, characterized by measures such as arm, ~~finger~~ or body holds, to ~~effectively prevent a child from causing injury to himself, herself or others, or damage to property~~ subject to the provisions of Section 384.60.

"Physical restriction" means momentary periods of touching or holding by direct person-to-person contact of the wrist, arm, shoulder, or hand. Momentary physical restriction shall not constitute physical restraint if it is accomplished with minimum force and used to prevent a child from completing an act that is likely to result in harm to self or others or to transport a child to a quieter environment.

"Physician" means a person licensed in the State of Illinois to practice medicine in all of its branches.

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"Secure residential care" means a facility which is designed and operated so as to ensure that all entrances and exits from the facility, a building or a room distinct part of the building are under the exclusive control of the staff of the facility, whether or not the child has freedom of movement within the perimeter of the facility, building or room distinct part of the building. Such facilities use physically restricting construction including, but not limited to, locks, bolts, gates, doors, bars, fences, and screen barriers; ~~electronic monitoring equipment and security alarm systems.~~

"Self-governance program" means an organized program which allows peers to participate in the discipline or behavior management of peers under the supervision and control of staff. Self-governance programs shall be restricted to programs identified and recognized by the Illinois Association of Peer Treatment Agencies and the Department of Children and Family Services as using a peer group treatment model.

"Social work supervisor" means a person with a Masters of Social Work degree from an accredited school of social work or an equivalent Masters degree in a human services field and two years of full time supervised experience in a social work setting. At least one social work supervisor in an agency shall have at least two years of experience as a supervisor.

(Source: Section 384.20 renumbered from Section 384.2 and amended at 19 Ill. Reg. 8165, effective JUN 09 1995)

## Section 384.30384-3 Use of Discipline

- a) Discipline may only be is used to help a child children develop self-control and learn to assume responsibility for his or her their own actions.
  - b) In order to help a child children know the rules of a child care facility, each facility shall have simple, understandable rules for both children and staff. The rules shall set the limits of behavior required for the protection of the group. The rules shall be explained orally in the child's primary language and a written copy given to each child at the time the child is admitted to the facility. ~~these rules shall be written and shall be explained to children and staff.~~
  - c) Each staff member shall receive training in the rules of the child care facility and shall be given a written copy of the rules prior to starting active service.
- d) With respect to all discipline as described below in subsections (e)(1) subparagraphs (d)(3) through (e)(5) (d)(6):
- 1) prior to imposition of discipline, ~~the child shall have the reasons for imposing the discipline explained and shall be given an opportunity to explain the reasons for the conduct leading to~~

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the discipline:

- 1) prior to the application of the discipline, the child shall be informed of the rule infraction;
- 2) prior to application of the discipline, the reasons for, the nature of, and duration of the discipline shall be explained to the child;
- 3) the case record shall contain a summary of the discipline imposed applied, specifying the conduct of the child leading to the discipline and the nature and duration of the discipline; and
- 4) the administrator of the facility or designee shall review all discipline applied imposed on individual children ~~at the end of the duration of the discipline~~ within 48 hours after administration of the discipline. ~~The and the~~ reviewer shall not be the individual who imposed the disciplinary measure. The administrator of the facility or designee shall approve or disapprove of the discipline imposed and shall indicate review and approval/disapproval by signing and dating the report of discipline. If the administrator or designee disapproves of the discipline imposed, the administrator or designee shall state the reasons for disapproval and shall correct the use of improper disciplinary techniques.

## e) Acceptable discipline includes:

- 1) firm positive statements;
- 2) rewards for positive behavior;
- 1) assigning special or additional tasks for periods not to exceed one month week;
- 2) temporary removal of privileges (e.g., television, radio or record player, special activity outside the facility) for periods not to exceed one month;
- 3) withholding a child's personal spending money, except as limited by Sections 384.40 (h) and (j), under the following circumstances: ~~in accordance with this part for periods not to exceed one month; the personal spending money of a child may be used as a constructive disciplinary measure to teach the child about responsibility; and the consequences of his/her behavior. However, no more than 50% of the child's monthly personal spending money shall be withheld for any reason; when a child's spending money has been reduced because he/she has broken a rule the caretaker shall keep the withheld money for the child and shall not use it for any other reason; the caretaker shall give the child opportunities to earn the money back and shall explain to the child how the spending money can be restored; withholding a child's monthly personal spending money shall occur only under the following circumstances:~~
  - A) for reasonable restitution for damages done by the child; or
  - B) for breaking the rules if the child has been given an oral warning that his/her spending money will be reduced for this infraction; and after the child had been given an oral

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warning that his/her spending money will be reduced for the infraction. Spending money may not be withheld for more than one month as discipline for a rules infraction.

- i) When a child's spending money has been withheld because he/she has broken a rule, the caretaker shall give the child opportunities to earn the money back and shall explain to the child how the money can be earned back. The facility shall keep complete records of all spending money which was withheld and any payments to the child.
- ii) If a child fails to earn back the spending money before his or her discharge from the facility, the withheld spending money must be given to the child's parent or guardian.
- 4) restriction to the child's sleeping quarters or room for periods not to exceed three hours per day ~~eight to ten hours~~; or
- 5) restriction to the premises or specified areas of the premises for periods not to exceed three days.

(Source: Former Section 384.3 renumbered to 384.30 and amended at 19 Ill. Reg. 8165, effective JUN 9 1995)

## Section 384.40384-4 Limitations of Discipline

- a) Discipline shall not be out of proportion to the particular inappropriate behavior and shall be initiated within 24 hours of learning of the inappropriate behavior. No child shall be subjected to discipline that is out of proportion to the particular inappropriate behavior, nor shall a child be subjected to discipline that is initiated more than 24 hours after facility child care staff learn of the inappropriate behavior.
- b) Discipline shall not be delegated to a child's peers. No child shall be subjected to discipline by the child's peers except as part of an organized self-governance program approved through Section 384.90.
- c) No child shall be subjected to group discipline because of the misbehavior of another member of the group unless group discipline is part of an approved self-governance program under Section 384.90.
- d) No child shall be subjected to verbal abuse, threats or derogatory remarks under any circumstances.
- e) No child shall be subjected to corporal punishment under any circumstances.
- f) No child shall be deprived of a meal or part of a meal as discipline. However, special between-meal treats may be withheld as a disciplinary measure.
- g) No child shall be deprived of visits or weekly telephone contacts with family, attorneys, or their legal assistants, his or her assigned caseworker or other persons who have established a parenting bond with the child as discipline.



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h)g) No child shall be deprived of clothing or sleep as discipline.  
 i)h) No child shall be subjected to mechanical restraints under any circumstances, except as provided in Section 384.70.

j)i) No child shall be deprived of items necessary for personal hygiene (e.g., toothpaste, toothbrush, soap, comb, etc.) as discipline.

k)j) No child shall be deprived of an opportunity for a daily shower or bath and access to toilet and water fountain as discipline.

l)k) No child shall be subjected to unclean and unsanitary living conditions as discipline.

m)l) No child shall be deprived of health care, including counseling, as discipline.

n)m) No child shall be deprived of exercise, as discipline assigned excessive exercise, forced to take an uncomfortable position, or assigned strenuous or harsh work, including work which is beyond the physical, mental, or emotional capacity of the child.

o)n) No child shall be deprived of a right to receive and send uncensored mail as discipline. However, if a child care facility suspects that a child is sending or receiving contraband materials via the mail, the child may be required to open the mail in the presence of staff so the contents may be examined for contraband.

p)o) No child shall be deprived of an opportunity to attend religious services and/or religious counseling of his/her choice as discipline.

q)p) No child shall be disciplined for toilet accidents.

r)q) No child shall be subjected to any behavior management techniques as discipline. -except-as-provided-in-Section-384.5 See Sections 384.50 - 384.100.

s)r) In addition to all other prescribed discipline as set forth in this part, no child shall be subjected to cruel or unusual punishment under any circumstances as discipline.

(Source: Former Section 384.4 renumbered to 384.40 and amended at 19 Ill. Reg. 8165, effective JUN 09 1995)

## Section 384.5 Behavior Management Techniques (Repealed)

a) No child-care facility shall use any behavior management technique unless approved by its governing body and the Department of Children and Family Services--discensed child-care facilities who are using any of the behavior management techniques described in this Section shall secure approval of their governing bodies and the Department within 90 days of adoption of this Part. Such facility or supervising agency shall establish a written plan for the use of the techniques which details the purposes, scope and limits of the techniques.

b) clearly describes personnel methods and procedures by which the technique is administered.

c) is approved and reviewed at least every two years by the governing body of the facility and the Department of Children and Family Services.

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4) provides for professional involvement and responsibility in administration and supervision of the technique;  
 5) provides that all persons using the technique are trained and supervised in the technique;

6) provides that documentation of training in use of the technique is in the personnel files of those empowered to use the technique;

7) describes the procedure for recordkeeping and data collection for review by the administration of the facility subject to review by Department of Children and Family Services personnel specifically designated by the Director of the Department and by other departments contracting for the facility's services;

8) provides for informing youth and agencies referring youth about the technique and procedures for its administration prior to a youth's admission to the facility;

9) provides that the technique is used on an individual basis with adequate procedures to preclude administration of the technique with respect to a child whose treatment plan counterindicates the use of the technique; and

10) provides that the only techniques which may be used are those as described in subparagraphs (b) through (e) below--if a child care facility wishes to utilize any behavior management technique not specified below, the processes identified in subparagraphs (a) (i) through (g) above are applicable.

b) Physical restraint shall be administered as an emergency temporary technique to be used only provided:

i) non-physical disciplinary means (Section 384.4(d)) have been attempted and are not proven effective or the emergent nature of the situation precludes attempting non-physical means;

2) physical restraint shall cease as soon as the youth has regained control or other behavior management techniques are administered;

3) physical restraint shall be administered in such a manner to avoid provoking further and more violent behavior in the youth;

4) physical restraint shall not consist of or be accompanied by the use of mechanical restraint striking hitting punching wrestling or the use of excessive or unnecessary force;

5) physical restraint is only employed by caretakers specifically trained in passive physical restraint techniques;

6) each use of physical restraint shall be reported as soon as practicable and a written record forwarded within 24 hours to the administrator of the facility and to the assigned caseworker or other person designated by the administrator;

7) the administrator of the facility or designee shall review all written records of physical restraint daily and shall inquire into the reasons for excessive use of physical restraint by any staff; and

8) upon request the child's parent(s) (unless parental rights have been terminated), guardian and attorney shall be notified within

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- 24 hours when a child is subjected to physical restraint.
- c) Confinement is limited only to children over the age of 11 years who pose an imminent danger to themselves or others and may be administered provided:
- 1) non-physical disciplinary means or physical restraint have been attempted and are not proven effective, or are inappropriate to prevent harm to the child or others or damage to property;
  - 2) the use of confinement is under the direct management and supervision of clinically trained staff (social work, psychology, psychiatry);
  - 3) confinement shall be in a room (whether locked or unlocked) which is adequately heated, lighted, ventilated and suitably furnished;
  - 4) all periods of confinement shall not exceed 2 hours in any 8-hour period;
  - 5) no period of confinement shall be employed unless ordered by a social work supervisor (or a similarly qualified staff person) specifically designated by the administrator of the facility and who is trained in the proper use of confinement and who has first personally observed the child and assessed the child's situation;
  - 6) each order of 15 minute periods of confinement shall state the events leading to the need for initial or continued confinement, the purposes and the length of time for which confinement is to be employed;
  - 7) all orders of confinement shall be reported as soon as practicable and written copies forwarded by the end of the shift to the administrator of the facility and to the assigned caseworker or other person designated by the administrator;
  - 8) the administrator of the facility or designee shall review all confinement orders daily and shall inquire into the reasons for the orders of confinement by any staff person who routinely orders them;
  - 9) the staff person who ordered the confinement shall assign a child care worker or similarly qualified person to visually monitor the child every five minutes and to maintain a written record of the observations;
  - 10) a physician shall be consulted or the child shall be transported to a hospital or mental health facility when confinement is necessary for more than 2 hours; the facility shall obtain permission from the child's parent(s) or guardian before admitting the child to a hospital or mental health facility; and upon request the child's parent(s) (unless parent rights have been terminated), guardian and attorney shall be notified within 24 hours when a child remains in confinement for 2 hours;
  - 11) Psychotropic drugs may only be used by a child care facility provided:
    - a) the drug is prescribed only by physicians licensed in the State of Illinois and is a clinical component of a child's treatment plan under the direct management and supervision of a physician;
    - b) the physician who prescribed the drug has personally examined the

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- child immediately prior to prescribing the drug; the examination shall be written into the child's record and accompanied by a statement by the physician containing the following information:
- A) a description of the child's current mental and physical condition, including a description of the physical symptoms, if any, resulting from effects of previously administered psychotropic drugs;
  - B) the intended effect of the prescribed drug, the duration and dosage of the drug, the relationship of the prescribed drug therapy to other forms of treatment and any other medication being given to the child; and
  - 3) after the proposer, duration and any known side effects of the drug have been explained to the parent(s) or guardian; the parent(s) or guardian has consented in writing to administration of the drug;
  - e) Secure residential care may be used only for alleged or adjudicated delinquent minors who are alleged or adjudicated in contempt of valid court orders and minors admitted to the facility under and subject to the protections of the Mental Health and Developmental Disabilities Code (Ill. Rev. Stat. 1991 ch. 91-1/2, pars. 1-100-1 et seq.). The referring agency shall have made a determination based on the recommendation of a psychiatrist or clinical psychologist who has personally examined the minor that the child requires secure residential care for the child or the community's protection.

(Source: Repealed at 19 Ill. Reg. 8165, effective JUN 9 1995)

## Section 384.50 Behavior Intervention Plans in Child Care Facilities

Child care facilities which accept children for whom the Department of Children and Family Services is legally responsible shall develop a behavior intervention plan which describes their facilities' programming. In addition, each child shall have an individual treatment plan that identifies those specific components of the overall behavior intervention plan that will be applied to that child and the specific behaviors the individual treatment plan is intended to address.

- a) Licensed child care facilities or their supervising agency shall develop a behavior intervention plan describing the behavior intervention techniques, as defined in Section 384.20, to be used by the facility. This plan shall include a detailed description of:
  - 1) the facility's approved crisis intervention procedures as defined in Section 384.20;
  - 2) daily programming identifying specific behavior intervention techniques; and
  - 3) behavior management techniques, as defined in Section 384.20, to control actions which present a danger to self or others.
- b) The behavior intervention plan shall be approved by the governing body



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of the facility and the Department. The specific requirements for the plan are set forth in subsections (c) through (e). Licensed child care facilities shall submit their written behavior intervention plans to the Department for approval by January 1, 1996. Behavior intervention plans shall not be implemented until approval by the Department has been obtained. The Department shall respond in writing within 90 days after receipt of the written plan with regard to approval, denial or request for amendment of the new plan.

The behavior intervention plan shall contain the following general components:

- 1) a written statement of the values and ultimate purpose in employing any treatment procedure;
- 2) a detailed description of the full range of intervention procedures or combination of procedures employed, including the operational details of the interventions themselves;
- 3) an ongoing system for collecting and reviewing monthly aggregate data that reflect the use of restrictive treatment elements, including the number of applications of confinement and/or physical restraint, the number of individuals whose behavior resulted in confinement and/or physical restraint, the names of staff members who participated in each instance of confinement or restraint, the range and average length of confinement and/or physical restraint, and unusual incidents and injuries;
- 4) a procedure for handling and reporting behavior emergencies; and
- 5) procedures for carrying out these provisions consistent with the needs of disabled individuals.

d) The behavior intervention plan shall contain the following information regarding personnel:

- 1) a description of the credentials of the personnel involved in designing, approving, implementing, monitoring and overseeing the implementation of the interventions;
- 2) a system for training and assuring the competency (both written and practical) of individuals involved in all facets of behavior intervention;
- 3) documentation that all personnel subscribe to a recognized Code of Ethics. The Code of Ethics can be endorsed by a professional organization but it must specifically address the professional's obligations with respect to the use of potentially restrictive interventions;
- 4) a policy for the discipline and/or discharge of personnel who violate the facility's policies and procedures on the use of behavior interventions;
- 5) a procedure providing for training and the annual certification of all persons using behavior intervention techniques, including training in the areas of the physiology of respiration, the circulatory system, and the body's response to excitement and stress; and
- 6) documentation of all training and retraining in the use of

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behavior interventions shall be maintained in the personnel files of staff. If the facility operates an organized self-governance program, documentation of all training and retraining of each child authorized to participate shall be maintained in the child's case file.

e) Behavior intervention plans shall contain a quality assurance mechanism that includes:

- 1) a procedure for review of the child's medical record which shall contain explicit documentation by the consulting physician for the facility that there are no medical contraindications to the use of specific behavior intervention or behavior management techniques. This assessment and documentation must be renewed following any significant change in the child's medical condition.
- 2) a procedure for review of any determination made by the treatment team at the child's initial case staffing as to whether any of the established behavior intervention or behavior management procedures would be contraindicated due to psychological or developmental reasons and documentation by the team in the child's permanent record. This review and documentation shall be renewed following any significant change in the child's developmental or psychological condition and at least once per quarter as part of a treatment review.
- 3) a process for approving, monitoring and reviewing individual treatment plans including both a technical review by a Behavior Treatment Committee, as defined in Section 384.20, and a human rights review by a Human Rights Committee, as defined in Section 384.20;
- 4) a policy regarding the use of restrictive behavior interventions or behavior management techniques that identifies instances in which such procedures may be contraindicated;
- 5) a system where instances of behavior that are dangerous to self or others shall be brought to the attention of appropriately trained personnel for review;
- 6) a policy which requires that unanticipated occurrences, as in emergency circumstances or repeated instances of the use of potentially restrictive interventions, be brought to the attention of appropriately trained personnel;
- 7) a policy for informing the child, referring agencies, parents, and guardians prior to admission concerning the behavior interventions employed by the facility and the procedures for their administration; and
- 8) a policy providing that the child's parent(s) (unless parental rights have been terminated), guardian, and attorney shall be advised of their right to be notified of each instance of physical restraint or confinement.

f) The facility shall establish policies and procedures designed to ensure that individual treatment plans are developed, implemented and



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reviewed in accordance with current standards of acceptable behavior practice. At a minimum, these policies and procedures shall provide as follows:

- 1) every individual's treatment plan shall include positive reinforcement for adaptive, socially acceptable behavior;
  - 2) relevant adaptive and maladaptive behaviors will be defined and quantified for non-emergency circumstances before any program which includes potentially restrictive elements, such as physical restraint and confinement, is implemented. The quantification of relevant target behaviors shall be an ongoing and integral part of the pre-treatment, treatment and post-treatment process;
  - 3) satisfactory evidence that maladaptive behaviors under consideration for treatment are not the result of medical/physical problems that would contraindicate behavior interventions;
  - 4) not less than quarterly review of potentially restrictive elements included in individual treatment plans with consideration given to decreasing and eventually discontinuing those program elements; and
  - 5) provisions shall be included in individual treatment plans for the maintenance and generalization of adaptive behaviors.
- g) Behavior intervention policies shall be reviewed and approved at least every two years by the governing body of the facility and the Department.
- h) The governing body of the facility and the Department must approve any additional techniques before they are implemented.
- i) Child care facilities may appeal adverse licensing decisions concerning the approval of their behavior intervention plan pursuant to 89 Ill. Adm. Code 383: Licensing Enforcement.

(Source: Added at 19 Ill. Reg. 8165, effective JUN 9 1995)

## Section 384.60 Physical Restraints

Physical restraint may be used only as a therapeutic measure when a child presents a threat of physical harm to self or others. Such threat shall include any dangerous behavior reasonably expected to lead to physical harm to self or others. Physical restraint shall not be used until after other less restrictive procedures or measures have been explored and found to be inappropriate. Physical restraint shall not be used for a child whose medical condition, mental illness, or developmental or psychological status contraindicates the use of this technique, as documented in the child's individual treatment plan.

- a) Physical restraint may be used to prevent runaway only when the child presents a threat of physical harm to self or others.
- b) Physical restraint shall not be used as discipline for rule infractions or as a convenience for staff.

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- c) A child may not be restrained for more than fifteen minutes beyond the point at which the child ceases presenting the specific behavior for which the restraint was ordered or any other behavior for which restraint is an appropriate intervention.
  - d) No single instance of restraint may exceed 60 consecutive minutes unless a registered nurse with supervisory responsibility or a physician confirms, in writing, following an on-site, personal examination of the child, that the restraint does not pose an undue risk to the child's health in light of the child's physical or medical condition. Alternatively, the facility may transport the child to a hospital or mental health facility.
  - e) In no event may restraint continue for more than two hours in a 24 hour period.
  - f) Physical restraint shall be administered in such a manner as to avoid provoking further and escalating incidents of the behavior in the child.
  - g) Physical restraint shall not consist of, or be accompanied by, the use of mechanical restraints, the use of excessive or unnecessary force, or any other action which produces pain, covers the head or any part of the face, or in any way restricts normal circulation and respiration of the child.
  - h) When physical restraint is imposed upon any child whose primary mode of communication is sign language, the child shall be permitted to have his or her hands free from restraint for brief periods during the restraint, except when such freedom may result in physical harm to the child or others.
  - i) Physical restraint shall be employed only by persons who are certified as having successfully completed a competency based training program presenting the specific procedures to be used. This certification must be renewed through a competency based assessment at least every 12 months. Current certification of competency shall be documented in the individual's permanent personnel record. If an organized self-governance program approved by the governing body and the Department allows for peer participation, only peers having completed such training may assist with the technique. This training shall include demonstrated competency in the humane and efficient implementation of the restraint program as demonstrated in applications of the procedures on participants in the training.
- Application of physical restraint requires direct supervision and management by the mental health professional, as defined in Section 384.20, designated as responsible for making clinical decisions at the time restraint is applied. If this person is not present when restraint is first applied, he or she must be summoned immediately and remain present until the restraint episode is concluded or relieved by a similarly qualified and clinically responsible person. Each use of physical restraint shall be reported as soon as practicable and a written record forwarded within 24 hours to the administrator of the facility or designee, the assigned caseworker in the facility, and the



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social work supervisor. If the use of physical restraint results in an injury requiring emergency medical treatment by medical personnel, the administrator shall receive an immediate report.

k) The written record of physical restraint shall include: the date of the occurrence; the precipitating incident(s); the age, height, weight, sex and race of the restrained child; the persons (including other residents) who participated in restraining the child; any witnesses to the precipitating incident and subsequent restraint; the exact methods of restraint used; the beginning and ending time of the restraint; and a detailed description of any injury arising from the incident or restraint. The supervisor in charge at the time of the incident and restraint shall review the report submitted by staff, inquire into any irregularities, and sign and date the written report indicating the date it was reviewed.

l) The administrator of the facility or designee shall review all written records of physical restraint the next business day. The administrator or designee shall approve or disapprove of the use of restraint under the circumstances described and shall indicate review and approval/disapproval by signing and dating the report of behavior intervention. If the administrator or designee disapproves of this instance of physical restraint, the administrator or designee shall state the reasons for disapproval and shall correct the improper use of physical restraint. The decision concerning the need for further action, if any, should be documented whenever any of the following occurs:

- 1) restraint is used repeatedly excessively by any staff person;
- 2) restraint is used repeatedly excessively on any child;
- 3) the duration of the restraint exceeds 30 minutes;
- 4) any provision in this Part is violated; or
- 5) the restraint results in any injury requiring emergency medical treatment by medical personnel.

m) Upon request, the administrator of the facility or designee shall notify the child's parent(s) (unless parental rights have been terminated), guardian or attorney in writing, within two business days, when a child is subjected to physical restraint, and shall provide such notice for any physical restraint which results in injury to the child.

(Source: Added at 19 Ill. Reg. 8165, effective JUN 09 1995)

**Section 384.70 Mechanical Restraints**

No child shall be subjected to mechanical restraint(s), as described in Section 384.20, unless prescribed by a licensed physician for the treatment of a physical disorder, the amelioration of a physical handicap, or to perform a medical procedure.

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(Source: Added at 19 Ill. Reg. 8165, effective JUN 09 1995)

**Section 384.80 Confinement**

Confinement is limited to children aged six and older who have been placed in a child care facility and who pose a threat of physical harm to themselves or others. Such threat may include any dangerous behavior reasonably expected to lead to physical harm to self or others. Confinement shall not be used until after other, less restrictive procedures or measures have been explored and found to be inappropriate. Confinement shall not be used for a child whose medical condition, mental illness or developmental or psychological status contraindicates the use of the technique, as documented in the individual treatment plan.

a) Confinement may be administered provided:

- 1) the use of confinement is under the direct management, supervision and approval of clinically trained staff (i.e., social work, psychology, psychiatry, or behavior analysis) who are trained and have demonstrated both written and applied competency in the use of this procedure;
- 2) confinement shall be in a room at least 40 square feet with the shortest wall at least 6 feet and with an 8 foot ceiling, which is heated, lighted, and ventilated as the other rooms of the facility. Confinement rooms are to be unfurnished and are to have padding or carpeting on the floors and walls up to the six foot level unless prohibited by local health or fire codes. Light fixtures are to be screened or recessed, and interior door knobs are to be removed. Confinement rooms shall be approved by the Department's licensing unit prior to usage. Locked confinement rooms must be inspected and approved by the Office of the State Fire Marshal;
- 3) the staff person who ordered the confinement shall assign a staff member trained in the use of the confinement to monitor the child by direct, in-person, visual observation on a continuous basis. A staff member assigned to monitor a child in a confinement room shall have this monitoring as his or her sole job duty throughout the period of confinement in order to ensure the child's safety while in the room, and will maintain a written record of the observations. Such observation may be through an uncovered one way mirror or regular window which provides for observation of the entire room at all times, if the staff person has unimpeded access to the confinement room and normal daily sounds are audible;
- 4) a written log is to be kept of each confinement episode. This log will contain entries by the staff member monitoring the confinement at no more than fifteen minute intervals clearly describing the behavior of the child at that time and a clinical impression of whether the behavior requires continuation of the

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confinement;

5) a child may not be kept in confinement more than thirty minutes beyond the point at which the child ceases presenting the specific behavior for which the confinement was ordered or any other behavior for which confinement is an appropriate intervention;

6) no child may be kept in confinement longer than a total of two hours in any 24 hour period. If confinement is necessary for more than two hours in a 24 hour period, a mental health professional shall approve continuing the confinement on an hourly basis with a total episode of confinement not to exceed four hours, or the child shall be transported to a hospital or mental health facility. If the child exhibits behavior which places that child at medical or physical risk, a physician shall approve continuing the confinement on an hourly basis with a total episode of confinement not to exceed four hours or the child shall be transported to a hospital or mental health facility;

7) belts, shoes, matches, weapons, or any other object that can be used to inflict self-injury are to be taken from the child or removed from the room prior to placement of the child in the locked confinement if there are indications in the child's record or the child's current behavior that such precautions are warranted;

8) children placed in confinement shall not be deprived of clothing (other than belts or items which may be used to inflict self-injury), food, toileting, medication, or other basic living functions; and

9) key locks may not be employed on locked confinement room doors. A staff member shall remain outside the confinement room or may remain inside the locked room at all times during which a child is confined. An automatic mechanism shall release the child from confinement in the event of a fire or other disaster.

b) Confinement may be used to prevent runaway only when the child presents a threat of physical harm to self or others.

c) Confinement shall not be used as discipline for rule infractions or for the convenience of staff.

d) Children with a developmental disability as their primary diagnosis shall not be placed in confinement.

e) Application of confinement requires direct supervision and management by the mental health professional designated as responsible for making clinical decisions at the time confinement is applied. If this person is not present when confinement is first applied, he/she must be summoned immediately to approve this intervention and remain available for further consultation until the episode is concluded or he/she is relieved by a similarly qualified and clinically responsible person. Each use of confinement shall be reported as soon as practicable and a written record forwarded within 24 hours to the administrator of the

## DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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facility or designee, the assigned caseworker in the facility, and the social work supervisor. The administrator of the facility or designee shall approve or disapprove of the use of confinement under the circumstances described and shall indicate review and approval/disapproval by signing and dating the report. If the administrator or designee disapproves of the use of confinement in this instance, the administrator or designee shall state the reasons for disapproval and shall correct the improper use of confinement. If the use of confinement results in an injury requiring emergency medical treatment by a physician, the administrator shall receive an immediate report.

f) A written report shall be created and maintained for each episode of confinement. This report shall state the events and behavior leading to the initiation of confinement; any additional behavior presented by the child during the confinement period which required continuation of confinement; the date of the occurrence; the age, height, weight, sex and race of the confined child; the precipitating incident(s); the persons (including other peers) who participated in confining the child; any witnesses to the precipitating incident and subsequent confinement; the exact methods of confinement used; the beginning and ending time of the confinement; and a detailed description of any injury occurring as a result of this incident and confinement. The supervisor on duty at the time of this incident and confinement shall review that report submitted by the child care staff, inquire into any irregularities, and sign and date the written report indicating the date it was reviewed.

g) Upon request, the child's parent(s) (unless parental rights have been terminated), guardian and attorney shall be notified in writing within two business days when a child remains in confinement for two hours or confinement results in injury.

(Source: Added at 19 Ill. Reg. 8165, effective JUN 09 1995)

## Section 384.90 Self-Governance Programs

a) Child care facilities may institute organized self-governance programs supervised by staff which allow peers to participate in the discipline or behavior management of peers upon compliance with this Section. In an organized self-governance program, staff retain full responsibility for ensuring that all discipline or behavior management is appropriate for the circumstances and does not violate the requirements of this Part. An organized self-governance program shall not be utilized as a substitute for adequate staffing.

b) A child care facility may only implement an organized self-governance program following approval of a written plan by the child care facility's governing body and the Department. The Department will not approve a plan for an organized self-governance program unless it



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includes at least the following:

- 1) parents, guardians and children are advised of the self-governance program prior to admission to the facility;
  - 2) the admissions policy clearly specifies the ages, behavior, functional level, and history of children to be accepted for the self-governance program. Children who do not meet the admissions policy shall not be admitted to the program;
  - 3) facility staff have education, experience, and training directly related to the administration and delivery of services in a self-governance program;
  - 4) the facility has developed and implemented a regular, ongoing monitoring, evaluation, and recordkeeping system for the self-governance program which can demonstrate whether the program, as implemented, is consistent with the plan approved by the Department;
  - 5) the discharge policy clearly specifies the criteria for successful completion of the program and also specifies what attitudes and behaviors will be reason for involuntary discharge from the self-governance program. The policy must identify who in the facility has authority to approve the successful completion or the involuntary discharge of a child from the program; and
  - 6) the facility's peer-assisted restraint policy complies with the standards in subsection (c) and Section 384.60.
- c) Peer-assisted restraint as part of a self-governance program is subject to the provisions of Section 384.60, Physical Restraints and this subsection.
- 1) All restraints shall be initiated only by staff certified under Section 384.60(g). Restraints shall be controlled at all times by certified staff. A certified staff member must always be present and must be the primary individual administering physical restraint to a child, with peers who have been trained in the technique acting as assistants, as needed.
  - 2) A mental health professional, as defined in Section 384.20, shall maintain the responsibility to monitor the emotional state, level of excitability, and safety of the peer group. The principle concern of the mental health professional must be for the safety of the child and the peer group.
  - 3) Children whose medical condition, mental illness or developmental or psychological status, as documented in the child's individual treatment plan, contraindicates the use of peer-assisted restraint shall not be involved in any way with this technique.
  - 4) Before assuming supervision of children, staff will be trained in peer-assisted restraint techniques and certified under Section 384.60(g). Staff will receive additional training once a year. Documentation of training and current certification shall be placed in an employee's personnel file.
  - 5) Peer group members must be 12 years of age or older and trained

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in peer-assisted restraint procedures, policies and philosophy before assisting in the restraint of a peer. A procedure for discussion with the group and the child involved about a restraint incident and how the restraint could have been avoided should be implemented.

- 6) Only the following types of restraints are authorized:

- A) Minor restraint where peers assist staff in holding the wrist, hand or arm of a sitting or standing child; or
  - B) Major restraint where peers assist staff in placing the child on the floor and holding the child's limbs to the floor with their hands.
- d) The Department's review of the plan for an organized self-governance program and any plan amendments shall be performed by a review team composed of qualified persons appointed by the Director which shall be representative of the Department and the Illinois Association of Peer Treatment Agencies. This review team shall review the plan for an organized self-governance program and any plan amendments and recommend a decision for the Director's final approval. The Department's final decision shall be made within 90 days after receipt of the complete plan for organized self-governance.
- e) The written plan shall be reviewed and approved at least once every two years by the child care facility's governing body and the Department.

(Source: Added at 19 Ill. Reg.

8165,

effective

JUN 09 1995)

## Section 384.100 Secure Residential Care

Secure residential care may be used only for alleged or adjudicated delinquents, minors who are alleged or adjudicated in contempt of valid court orders and minors admitted to the facility under, and subject to the protection of, the Mental Health and Developmental Disabilities Code [405 ILCS 35]. The referring agency shall have made a determination, based on the recommendation of the psychiatrist or clinical psychologist who has personally examined the minor, that the child requires secure residential care for the child's or the community's protection.

(Source: Added at 19 Ill. Reg.

8165,

effective

JUN 09 1995)

## Section 384.110 Reports

Child care facilities shall report to the Department licensing authority unusual incidents regarding discipline and behavior management of children placed in the facility.

- a) The facility shall report as an unusual incident:

- 1) any injury received by a child as a result of discipline or

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behavior management;

- 2) any 30-day period in which five or more instances of restraint and/or confinement of a specific child occurred;
- 3) any violation of this Part.

- b) Reports shall be made in writing and postmarked within two business days after the unusual incident.

(Source: JUN 09 1995 at 19 Ill. Reg. 8165, effective

## Section 384.120 Severability of this Part

If any court of competent jurisdiction finds any Section, clause, phrase, or provision of this Part is unconstitutional or invalid for any reason whatsoever, this finding shall not affect the validity of the remaining portions of this Part.

(Source: Added at 19 Ill. Reg. 8165, effective JUN 09 1995)

## ILLINOIS COMMERCE COMMISSION

## NOTICE OF ADOPTED AMENDMENT

- 1) Heading of the Part: Applications

- 2) Code Citation: 92 Ill. Adm. Code 1202

- 3) Section Number: Adopted Action:  
1202.60 New Section

- 4) Statutory Authority: Implementing Sections 18c-1202 and 18c-2107 and authorized by Section 18c-1202 of the Illinois Commercial Transportation Law [625 ILCS 5/18c-1202 and 5/18c-2107].

- 5) Effective Date of Amendment: June 8, 1995

- 6) Does this rulemaking contain an automatic repeal date? No

- 7) Does this amendment contain incorporations by reference? No

- 8) Date Filed in Agency's Principal Office: June 8, 1995

- 9) Notice of Proposal Published in Illinois Register: January 20, 1995, at 19 Ill. Reg. 522.

- 10) Has JCAR issued a Statement of Objections to this amendment? No

- 11) Difference(s) between proposal and final version: There are no differences between the proposal and the final version.

- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? There were no agreed changes.

- 13) Will this amendment replace an emergency amendment currently in effect?  
No

- 14) Are there any amendments pending on this Part? No

- 15) Summary and Purpose of Amendment: This amendment reflects the effect of the federal preemption of state regulation of commercial motor carriers (except carriers of household goods) enacted by P.L. 103-305 (Title VI of the Federal Aviation Administration Authorization Act of 1994). It establishes a temporary public carrier certificate for new carriers (except carriers of household goods) who wish to commence operating in Illinois. By leaving the title as a "temporary" license, we leave for the legislature the decision on what permanent licenses the State of Illinois will issue truckers in this deregulated environment. The agency had anticipated that the Illinois Commercial Transportation Law would be amended during the Spring 95 legislative session, however, the General



## ILLINOIS COMMERCE COMMISSION

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Assembly adjourned before taking final action on the bill. The Commission will continue to issue temporary certificates to new carriers until the Legislature can take up the bill again in the fall.

- 16) Information and questions regarding this adopted Amendment shall be directed to:

Kathy Campbell  
Illinois Commerce Commission  
527 East Capitol Avenue  
P.O. Box 19280  
Springfield, IL 62794-9280  
(217)785-4869

The full text of the Adopted Amendment begins on the next page:

## ILLINOIS COMMERCE COMMISSION

## NOTICE OF ADOPTED AMENDMENT

TITLE 92: TRANSPORTATION  
CHAPTER III: ILLINOIS COMMERCE COMMISSION  
SUBCHAPTER a: COMMERCIAL TRANSPORTATION GENERALLY

PART 1202  
APPLICATIONS

Section  
1202.10  
1202.20  
1202.30  
1202.40  
1202.50  
1202.60

Application for Permanent Authority  
Notice of Application for Permanent Authority  
Petitions for Leave to Intervene  
Temporary Motor Carrier of Property License Application  
Emergency Temporary Motor Carrier of Property License Application  
Application for Temporary Public Carrier Certificate

AUTHORITY: Implementing Sections 18c-1202 and 18c-2107 and authorized by Section 18c-1202 of the Illinois Commercial Transportation Law [625 ILCS 5/18c-1202 and 18c-2107].

SOURCE: Adopted at 11 Ill. Reg. 17528, effective October 15, 1987; amended at 15 Ill. Reg. 17568, effective December 1, 1991; emergency amendment at 18 Ill. Reg. 14157, effective August 24, 1994, for a maximum of 150 days; amended at 19 Ill. Reg. 8195, effective JUN 08 1995.

Section 1202.60 Application for Temporary Public Carrier Certificate

After January 1, 1995, motor carriers of property other than household goods shall file an application with the Commission for a Temporary Public Carrier Certificate. The application shall be on forms provided by the Commission, and shall be accompanied by the required fee set forth in 92 Ill. Adm. Code 1205.10. Upon determination that the applicant is in compliance with the requirements of 92 Ill. Adm. Code 1425 applicable to insurance, and that the applicant has paid all required per vehicle and filing fees, the Commission shall issue a Temporary Public Carrier Certificate authorizing the applicant to engage in for-hire transportation of property in intrastate commerce in Illinois.

(Source: Added at 19 Ill. Reg. 8195, effective JUN 08 1995)

## ILLINOIS COMMERCE COMMISSION

## NOTICE OF ADOPTED AMENDMENT

- 1) Heading of the Part: Fees and Taxes
- 2) Code Citation: 92 Ill. Adm. Code 1205
- 3) Section Numbers: Adopted Action:  
 1205.10 Amend  
 1205.100 Amend
- 4) Statutory Authority: Implementing Sections 18c-1202(9), 18c-1501, 18c-1502, and 18c-5102 and authorized by Section 18c-1202(9), 18c-1501, 18c-1502, and 18c-5102 of the Illinois Commercial Transportation Law [625 ILCS 5/18c-1202(9), 18c-1402, 18c-1501, 18c-1502, and 18c-5102]
- 5) Effective Date of Adopted Amendment: June 8, 1995
- 6) Does this rulemaking contain an automatic repeal date? No.
- 7) Does this amendment contain incorporations by reference? No.
- 8) Date Filed in Agency's Principal Office: June 8, 1995.
- 9) Notice of Proposal Published in Illinois Register:  
 January 20, 1995, at 19 Ill. Reg. 525.
- 10) Has JCAR issued a Statement of Objections to this amendment? No.
- 11) Difference(s) between proposal and final version: There are no differences between the proposal and the final version.
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? There were no agreed changes.
- 13) Will this amendment replace an emergency rule currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of amendment: This amendment takes into account the effect of the federal preemption of state regulation of commercial motor carriers (except carriers of household goods) enacted by P.L. 103-305 (Title VI of the Federal Aviation Administration Authorization Act of 1994). The application fee for Public Carrier Certificates (non-household goods carriers) has been lowered from \$600 to \$300, and the per vehicle fee for those carriers has been lowered from \$25 to \$6. These fees for household goods carriers remain the same at \$600 and \$25.

## ILLINOIS COMMERCE COMMISSION

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- 16) Information and questions regarding this adopted amendment shall be directed to:

Kathy Campbell  
 Illinois Commerce Commission  
 527 East Capitol Avenue  
 P.O. Box 19280  
 Springfield, IL 62794-9280  
 (217)785-4869

The full text of the Adopted Amendment begins on the next page:



## ILLINOIS COMMERCE COMMISSION

## NOTICE OF ADOPTED AMENDMENT

TITLE 92: TRANSPORTATION  
CHAPTER III: ILLINOIS COMMERCE COMMISSION  
SUBCHAPTER a: COMMERCIAL TRANSPORTATION GENERALLY

PART 1205  
FEES AND TAXES

## SUBPART A: FILING FEES

Section	Filing Fees
1205.10	
1205.20	Late-Filing Fees (Repealed)

## SUBPART B: FRANCHISE-AND-FRANCHISE-RENEWAL-FEES ANNUAL VEHICLE FEES

Section	Intrastate Motor Carriers of Property
1205.100	
1205.110	Interstate Motor Carriers of Property
1205.115	Ordering Fees

## SUBPART C: GROSS RECEIPTS TAXES

Section	Gross Receipts Taxes for Motor Carriers of Passengers (Repealed)
1205.200	
1205.210	Gross Receipts Taxes for Rail Carriers
1205.220	Gross Receipts Taxes for Common Carrier Pipelines

## SUBPART D: PAYMENT PROCEDURES

Section	Payment of Fees
1205.300	

AUTHORITY: Implementing and authorized by Sections 18c-1202(9), 18c-1501, 18c-1502, and 18c-5102 of the Illinois Commercial Transportation Law [625 ILCS 5/18c-1202(9), 18c-1501, 18c-1502 and 18c-5102].

SOURCE: Emergency rules adopted at 11 Ill. Reg. 1497, effective January 1, 1987, for a maximum of 150 days; adopted at 11 Ill. Reg. 9853, effective May 8, 1987; amended at 12 Ill. Reg. 15540, effective October 1, 1988; amended at 13 Ill. Reg. 11460, effective July 1, 1989; amended at 18 Ill. Reg. 11155, effective July 1, 1994; emergency amendment at 18 Ill. Reg. 16464, effective October 21, 1994, for a maximum of 150 days; amended at 19 Ill. Reg. 8198, effective JUN 08 1995.

## SUBPART A: FILING FEES

## Section 1205.10 Filing Fees

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Filing fees for proceedings under the Illinois Commercial Transportation Law [625 ILCS 5/18c-1101 et seq.] shall be as follows:

a) Motor carrier of property license application	
1) Application for new license	\$300
A) Application for temporary authority	
B) Application for emergency temporary authority	\$300
C) Other application for new license (less than general commodity)	\$600
D) General commodity application (common or contract)	\$900
2) Application for extended license	
A) For temporary authority	\$300
B) For emergency temporary authority	\$300
C) Other application for extended license	\$600
3) Application to transfer license	
A) Transfer under Section 18c-4306 of the Illinois Commercial Transportation Law (Ill. Rev. Stat. 1987, ch. 95 1/2, par. 18c-4306)	\$300
B) Other application to transfer license	\$600
4) Application to reinstate a suspended or revoked license or vacated order	\$600
5) Application for new or extended non-relocation towing license	\$600
b) Petition to restate commodity description	\$ 25
c) Petition for certificate of exemption	\$300
d) Petition for interpretation of authority	\$250
e) Petition to amend authority	\$ 75
f) Petition for name change	\$ 75
g) Rate filings	
1) Application for authority to establish a released value rate	\$ 75
2) Special permission application	\$ 75
h) Application to register as an exempt interstate motor carrier of property or passengers	\$ 25
i) Motor carrier of property equipment lease filing	\$ 25
j) tariff maintenance fee, payable by December 31 of each year.	\$ 30
k) Motor carrier of property proof of insurance coverage filing	\$ 25
l) Broker's license application	
1) Application for broker's license	\$600
2) Application to transfer broker's license	\$300
m) Intervention	\$ 25
n) Application for Temporary Public Carrier Certificate	per intervenor \$300

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(Source: Amended at 19 Ill. Reg. 8198, effective  
JUN 08 1995)

## SUBPART B: FRANCHISE-AND-FRANCHISE-RENEWAL-FEES ANNUAL VEHICLE FEES

## Section 1205.100 Intrastate Motor Carriers of Property

- a) The annual franchise and franchise renewal fee for each vehicle operated by or under authority of an intrastate motor carrier of property authorized to transport household goods is \$25.00 whether or not the vehicle is used in the transport of household goods for calendar-1988-and-subsequent-years.
- b) For calendar year 1995 and subsequent years, the annual fee for each vehicle operated by an intrastate motor carrier of property (other than household goods), is \$6.00.

(Source: Amended at 19 Ill. Reg. 8198, effective  
JUN 08 1995)

## DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

## NOTICE OF ADOPTED RULES

- 1) Heading of the Part: Standards and Requirements for Pre-Admission Screening and Participating Mental Health Centers
- 2) Code Citation: 59 Ill. Adm. Code 258
- 3) Section Number: Adopted Action:

258.100 New Section  
258.110 New Section  
258.120 New Section  
258.130 New Section  
258.200 New Section  
258.210 New Section  
258.220 New Section  
258.230 New Section  
258.240 New Section  
258.250 New Section  
258.260 New Section  
258.270 New Section  
258.280 New Section  
258.300 New Section  
258.310 New Section  
258.320 New Section  
258.330 New Section  
258.340 New Section  
258.350 New Section  
258.360 New Section  
258.370 New Section  
258.380 New Section  
258.390 New Section  
258.400 New Section  
258.410 New Section  
258.500 New Section  
258.510 New Section  
258.520 New Section  
258.530 New Section  
258.540 New Section

- 4) Statutory Authority: Implementing P.A. 88-484, effective September 10, 1993, and authorized by Section 5-104 of the Mental Health and Developmental Disabilities Code [405 ILCS 5/5-104] and Section 5 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/5].

- 5) Effective Date of Adopted Rules: June 15, 1995

- 6) Does this rulemaking contain an automatic repeal date? No.



## DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

## NOTICE OF ADOPTED RULES

7) Do these rules contain incorporations by reference? This rulemaking incorporates by reference State and federal statutes and regulations. It also incorporates by reference the standards of nationally recognized associations.

8) Date Filed in Agency's Principal Office:

9) Notice(s) of Proposal Published in Illinois Register: June 17, 1994 (18 Ill. Reg. 8759)

10) Has JCARE issued a Statement of Objections to these rules? No. JCARE has not issued an objection to these rules.

11) Difference(s) between proposal and final version: **The Department made the following changes in response to recommendations from the Administrative Code Division:**

In the table of contents, the phrase "denial or" after the word "regarding" was added to the heading for Section 258.270. The Administrative Code Division made this change for the Department prior to publication in the Illinois Register.

In the table of contents, the word "responsibilities" was replaced with the phrase "and requirements" in the heading for Section 258.390. The Administrative Code Division made this change for the Department prior to publication in the Illinois Register.

**Section 258.130** - The definition of "Screening" was moved so that it now follows the definition of "registered nurse".

**Section 258.220(h)** - The phrase "Section 258.220(g)" was replaced with the phrase "subsection (g) of this Section". The Administrative Code Division recommended that the Department add the word "above" after the phrase "subsection(g)" but the Department elected to add the phrase "of this Section" for consistency.

**Sections 258.310 (b)(2)(A), (B), (C) and (D)** - The periods behind each label were replaced with a parenthesis, i.e., ").".

**The Department made the following changes in response to public comments:**

**Section 258.210(b)** - The last sentence was added.

**Section 258.260(a)(6)** - The end word "or" was deleted.

**Section 258.260(a)(7)** - The period was replaced with a semicolon and the end word "or" was added.

## DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

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**Section 258.260(a)(8)** - Added.

**The Department made the following technical changes:**

In item 4 of the list of questions the phrase "Section 5-105" was corrected to read "Section 5-104"; the period after the phrase "September 10" was deleted.

In the Main Source Note, the reference to volume 19 of the Illinois Register was substituted for the reference to volume 18 of that publication.

**Section 258.130** - In the definition of "Community service area" the letters "s" and "a" on the words "service" and "area" were put in regular type; in the statute they are capitalized.

**Section 258.130** - In the definition of "Qualified certifier", the letter "c" on "certifier" was placed in regular type; in the statute it is capitalized.

**The Department made the following changes in response to agreements made with the Joint Committee on Administrative Rules:**

In the Authority Note, the reference to the 1992 State Bar Edition, 1993 Supp. and the comma following the citation were deleted.

**Section 258.120** - The word "the" between the words "that" and "individuals" in the first line was deleted.

**Section 258.120(a)** - In the citation the phrase "2-100 through 2-202 was replaced with "Ch.2".

**Section 258.120(d)(2)** - The comma following "Inc." in the second line and the parenthesis following the word "Act" in the fourth line were deleted. The parenthesis following the citation "[405 ILCS 45/1]" in the fourth line and the comma following the word "entities" in the seventh line were added.

**Section 258.130** - In the definition of "Admitting privileges", the commas following the words "setting" in the second line, "organization" in the third line and "standards" in the fourth line and the word "the" before the word "hospital's" in the third line were deleted. The phrase "that is" following the word "setting" in the second line was added; the word "standards" was substituted for the word "standard" before the phrase "as required" in the fourth line.

In the definition of "Aftercare", the word "of" following the word "care" in the first line was deleted. The word "provided" in the

## DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

## NOTICE OF ADOPTED RULES

first line and the comma after the word "setting" in the last line were added.

In the definition of "Alternative services", the phrase "state operated" was replaced with the phrase "State-operated" in the third line.

In the definition of "Assertive community treatment (ACT)", the phrase "the clients" was substituted for the word "their" in the fifth line. The commas following the words "context" in the sixth line, "persevering" and "basis" in the seventh line and the word "their" before the phrase "local community" in the tenth line and the word "and" before the word "continuously" in the eleventh line were deleted. The phrase "sometimes insistent" was placed in parenthesis.

The definition of "Clinical record" was rewritten to read "Documentation kept by a facility or community provider concerning the services provided to an individual with mental illness".

In the second line of the definition of "Community provider", the word "a" before the word "mental" was deleted and the word "illnesses" was substituted for the word "illness".

The first seven lines of the definition of "Continuity of care" were rewritten to read: "Refers to a systematic approach to the provision of care necessary when needed and where needed, with a relatedness between past, present and future care in conformity with the therapeutic needs of the individual. Individual care is primarily the responsibility of the community provider, regardless of the location of service. Services must be consistent across settings."

In the definition of "Dependent" the word "who" was substituted for the word "Whom" in the second line.

In the definition of "Informed consent", the commas after the words "consent" and "guardian" in the second line were deleted.

In the definition of "Interdisciplinary process", commas were added after the word "needs" in the second line, and after the words "services" and "develop" in the fourth line. The phrase "a services plan and to" before the word "review" in the last line was deleted and the phrase "a service" was substituted for the word "the" before the word "plan" in the last line.

In the definition of "Interdisciplinary team" or "team", the comma following the word "guardian" in the fifth line and the phrase "and to design" before the word "services" in the sixth line were deleted. In the fifth line, the word "and" was substituted for the phrase "as well

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as" following the word "guardian". A comma was added after the word "needs" in the sixth line and the last sentence was rewritten.

In the definition of "Local area network (LAN)" a comma was added after the word "includes" in the last sentence.

In the last sentence of the definition of "Mental illness", the letter "p" on the word "Part" was capitalized.

In the definition of "Presented", the phrase "State-operated facility" was added before the word "SOF"; "SOF" was placed in parentheses; the comma following the phrase "not limited to" was deleted and the letter "s" on the word "State" was capitalized and the word "State-operated" was hyphenated.

In the definition of "Presenting" the phrase "State-operated facility" and the parentheses around the word "SOF" were deleted.

In the definition of "Registered nurse", the "t" in the word "the" was put in lower case.

In the definition of "Screening, assessment and support services (SASS)", the word "services" following the word "SASS" in the fifth line was deleted.

Section 258.210(g) - The end word "services" was deleted.

Section 258.220(d) - The semicolon following the date July 1, 1994 in the last sentence was replaced with a comma and the word "with".

Section 258.250(d) - The comma following the word "contract" in the third line was deleted.

Section 258.270(i) - The word "after" was substituted for the word "of" following the word "days" in the fourth line.

Section 258.300(c) - The word "screening" following the word "completed" in the third line was deleted.

Section 258.300(f)(6) and (f)(16)(B) - The end periods were replaced with semicolons.

Section 258.300(h)(1) - The word "individual's" was substituted for the word "individual's (s)"; the end comma was replaced with a semicolon.

Section 258.300(h)(4) - The end word "and" was deleted.



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**Section 258.300(h)(5)** - The end word "and" was added.

**Section 258.300(h)(6)** - The opening phrase "In addition, the screening shall determine" and the word "determine" following the word "exist" in the first sentence were deleted.

**Section 258.300(h)(7)** - Relabeled "Agency note".

**Section 258.300(i)(1)** - The word "PMHCs" was substituted for the word "PMHC's" in the second line.

**Section 258.300(i)(5)** - The word "inpatient" was substituted for the word "in-patient".

**Section 258.300(i)(6)** - The word "subsequently" was substituted for the word "subsequent".

**Section 258.310** - The opening paragraph was relabeled subsection (a)(1) causing former subsections (a)(3) to be relabeled (a)(2); (a)(1) and (2) to be relabeled (a)(1)(A) and (a)(1)(B); (a)(2)(A), (B) and (C) to be relabeled (a)(1)(B)(i), (ii) and (iii).

**Section 258.310(a)(1)(relabeled)** - The end word "if" was added and the end comma was replaced with a colon.

**Section 258.310(a)(1)(A)(relabeled)** - The comma following the word "problem" in the fourth line was deleted.

**Section 258.310(a)(1)(B)(relabeled)** - The comma following the end word "who" was added and the comma word "director" in the fourth line was deleted. In the fifth line, the word "designee" was substituted for the word "designatee".

**Section 258.310(a)(2)(relabeled)** - The commas following the words "professionals" in the third line and "physician" in the fourth line were deleted.

**Section 258.310(a)(2)(C)** - The comma following the word "condition" was deleted.

**Section 258.310(b)** - The opening paragraph was labeled subsection (b)(1), causing subsections (b)(1), (2), (3) and (4) to be relabeled (b)(1)(A), (b)(1)(B), (b)(2), and (b)(3) and subsections (b)(2)(A), (B), (C) and (D) to be relabeled (b)(1)(B)(i), (ii), (iii) and (iv).

**Section 258.310(b)(1)(A) (relabeled)** - The end word "and" was added.

**Section 258.310(b)(1)(B) (relabeled)** - In the third line, the comma

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following the word "parentis" and the word "of" before the phrase "an interested person" were deleted.

**Section 258.310(b)(1)(B), (i), (ii), (iii) and (iv) (relabeled)** - The periods following the labels were replaced with parentheses, i.e., ")".

**Section 258.310(b)(2)(relabeled)** - The commas following the words "professionals" in the second line and "physician" in the fourth line were deleted; the word "and" was added to the fourth line.

**Section 258.310(c)** - The comma after "SOFs" was deleted; the phrase "state operated" was replaced with "State-operated".

**Section 258.310(d)** - The phrase "state operated" was replaced with "State-operated".

**Section 258.320(b)(4)** - The commas after the word "unless" in the fifth line and the word "physician" in the sixth line were added.

**Section 258.320(d)** - The phrase "an individual" following the word "screened" in the third line was deleted and the word "SOF's" was substituted for the word "SOFs" in the last line.

**Section 258.330(c)** - In the fourth line, the word "possible" following the word "admission" was deleted.

**Section 258.340(b)** - The comma after the abbreviation "SOF" in the second line was deleted and the comma after the word "or" in the third line was added.

**Section 258.340(d)(2)** - The comma after the phrase "sign language" in the second sentence was deleted. In this same sentence, the end phrase "by the qualified certifier" was moved and placed after the phrase "in writing" and set off by commas.

**Section 258.340(d)(3)** - The comma after the word "indicate" in the fifth line was deleted.

**Section 258.340(d)(4)** - The comma after the word "appropriate" in the third line was deleted.

**Section 258.340(d)(7)** - The comma after the word "bypassed" was deleted.

**Section 258.350(a)** - The sentence and phrase were combined into one sentence. The word "This" was replaced with the word "that" after the word "process" and the end period was replaced with a semicolon.

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**Section 258.360(a)** - In the fourth line the comma behind the word "need" was moved and placed behind the word "and". In the tenth line, the colon behind the word "consider" was deleted and the letter "f" on the word "factors" was placed in lower case.

**Section 258.360(b)** - The second paragraph was incorporated into the first paragraph. The comma following the word "PMHC" in the fifth line was deleted.

**Section 258.390(b)** - The date "1993" was substituted for the date "1991" in the third line.

**Section 258.390(c)** - The commas after the words "adults" and "adolescents" in the third line and after the word "counties" in the last sentence; the word "while" before the phrase "in more densely populated" in the last sentence were deleted. In the third line, the word "shall" was substituted for the word "to" before the word "be".

**Section 258.400(c)** - The phrase "If the individual is" was replaced with the phrase "If an individual who is".

**Section 258.400(d)** - The phrase "be to" was added before the word "arrange" in the fourth line and the word "PMHC's" was substituted for the word "PMHC" in the sixth line.

**Section 258.400(e)** - The end phrase "the PMHC's shall" was replaced with "the following shall apply".

**Section 258.400(e)(1)** - The comma following the word "provided" in the third line was deleted.

**Section 258.410** - The phrase "Department-funded" was substituted for the phrase "DMHDD funded" in the third line.

**Section 258.500(b)** - The word "purposes" was replaced with the word "purpose" in the fifth line.

**Section 258.500(c)** - The word "PMHC's" was replaced with the word "PMHC".

**Sections 258.500(e) and (f)** - The word "PMHC's" was replaced with the word "PMHC".

**Section 258.500(f)** - The word "center" was replaced with the word "centers".

**Section 258.500(f)(1)(C)** - The comma following the word "and" in the second line was deleted.

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**Section 258.500(f)(2)** - The phrase "state operated" was replaced with the phrase "State-Operated".

**Section 258.500(f)(2)(A)** - The end period was replaced with a semicolon.

**Section 258.500(f)(2)(F)** - The "i" on the initial word "If" was capitalized.

**Section 258.510** - The commas following the words "director" in the third line and "effort" in the fourth line were deleted.

**Section 258.520(c)(1)** - The word "of" following the word "days" in the second line was replaced by the word "after".

**Section 258.520(c)(2)** - The commas following the words "recommendation" in the third line and "admission" in the fifth line were deleted.

**Section 258.520(c)(3)** - The word "of" following the word "days" in the second line was replaced by the word "after".

**Section 258.530** - The citations to the Department's rule 112.10 were corrected to read "59 Ill. Adm. Code 112.10".

**Section 258.540(a)** - The word "PMHC's" was replaced with the word "PMHCs".

**Section 258.540(c)** - The comma following the word "and" in the second line was added.

**Section 258.540(e)** - In the second line, a comma was added after the word "individual", "his or her" was substituted for the word "their" and the comma after the word "guardian" was deleted. In the fifth line, the word "their" was substituted for the phrase "his or her" and the word "upon" after the word "infringed" was added.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes, all changes have been made.

13) Will these rules replace an emergency rule? No.

14) Are there any amendments pending on this Part? No.

15) Summary and Purpose of Rules: Part 258 implements P.A. 88-484, effective September 10, 1993. P.A. 88-484 created participating mental health



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centers which would have contracts with the Department to screen individuals prior to admission to a State-operated facility. The decision to become a participating mental health center is a voluntary one on the part of the community agency. This Rule was developed with the extensive input of community agencies, primary and secondary consumers, advocates, health care professionals and other interested parties.

Key components of this Rule are the provisions which establish requirements that must be fulfilled before a community agency can apply to become a participating mental health center. The Rule further establishes a process for the Department to follow in reviewing applications and procedures to be followed if an application is denied. This Rule contains Sections that provide guidance in determining whether an individual who presents for admission to a State-operated facility is appropriate for such admission. There are also procedures to be followed in the event that an individual is denied admission by a State-operated facility that has been recommended by the participating mental health center.

Based on public comments received, on March 9, 1995 the Department entered into an agreement with the Illinois Association of Community Mental Health Agencies which provides that:

1. The Department will propose an amendment to Part 258 soon after adoption;
2. Participating mental health center application is voluntary. The Department will communicate to eligible providers that voluntary participating mental health center status is not required by Rule;
3. For community service areas that are not served by a participating mental health center, the Department shall designate through the continuity of care agreements an agency or agencies to serve as a pre-screener;
4. To the extent possible, the Department will delay formal adoption of this Part until the amendment outline in item (1) is agreed to by the Department and the Illinois Association of Community Mental Health Agencies; and
5. In order to fully explore how Part 258 would interface with managed care, the Department will delay implementation until the role and function of an administrative service organization is clarified.

- 16) Information and questions regarding this adopted amendment shall be directed to:

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Judith Hollenberg  
Rules Administrator  
403 Stratton Building  
Springfield, IL 62765  
(217) 785-3313  
FAX: (217) 524-0835

The full text of the Adopted Rules begins on the next page:

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TITLE 59: MENTAL HEALTH  
CHAPTER I: DEPARTMENT OF MENTAL HEALTH

## PART 258

STANDARDS AND REQUIREMENTS FOR  
PRE-ADMISSION SCREENING AND PARTICIPATING MENTAL HEALTH  
CENTERS

## SUBPART A: GENERAL PROVISIONS

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Purpose  
Incorporation by reference  
Individuals' rights  
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## SUBPART B: PARTICIPATING MENTAL HEALTH CENTER REQUIREMENTS

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Applicability  
Criteria for application and participation  
Application and formal agreement  
Renewal of formal agreement  
Non-transferability of formal agreement  
Withdrawal  
Denial of or revocation of formal agreement  
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## SUBPART C: SCREENING AND DISPOSITION SERVICES

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Screening service requirements  
State-operated facility admission criteria  
State-operated facility admission disposition  
Court-ordered admissions  
Admission of individuals alleged to be subject to involuntary admission  
Court linkage  
Linkage and continuity of care  
Confidentiality  
Clinical records  
Service area boundaries, community service area boundaries and requirements  
Responsibility for undomiciled individuals and individuals from a geographic area other than that served by the participating mental health center

258.400

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258.410 Interagency linkages

## SUBPART D: QUALITY ASSURANCE

Section  
258.500  
258.510  
258.520  
258.530  
258.540

Quality assurance requirements and performance indicators  
Contract dispute resolution  
Disposition dispute resolution process  
Utilization review hearings  
Complaint investigation

AUTHORITY: Implementing P.A. 88-484, effective September 10, 1993 [405 ILCS 5] and authorized by Section 5-104 of the Mental Health and Developmental Disabilities Code [405 ILCS 5/5-104] and Section 5 of the Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705/5].

SOURCE: Adopted at 19 Ill. Reg. 8203, effective  
JUN 15 1995.

## SUBPART A: GENERAL PROVISIONS

## Section 258.100 Purpose

- a) The requirements set forth in this Part establish criteria for participation by providers which voluntarily elect to become "participating mental health centers" (PMHCs) as defined in Section 258.130. These requirements are for the purpose of assuring that individuals at risk of hospitalization in State-operated facilities are assessed for need for hospitalization and receive the least restrictive appropriate services based on an assessment of their needs and the services available.
- b) The Department shall use these requirements to enter into formal agreements with providers to become participating mental health centers.
- c) The service goals include, but are not limited to the following:
  - 1) Providing a range of services so that individuals can receive these services in settings which do not unnecessarily restrict their liberty;
  - 2) Enabling individuals with a mental illness to access services, commensurate with their preferences and needs;
  - 3) Preventing unnecessary hospitalization and dislocation or extrusion of individuals with a mental illness from their home communities;
  - 4) Insuring continuity of care; and
  - 5) Providing for a quality assurance process for screening services.

## Section 258.110 Incorporation by reference



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Any rules of an agency of the United States or of a nationally-recognized organization or association that are incorporated by reference in this Part are incorporated as of the date specified and do not include any later amendments or editions.

**Section 258.120 Individuals' rights**

To insure that individuals' rights are protected and that all services provided to individuals comply with the law, participating mental health centers shall ensure that:

- a) The rights of individuals shall be protected in accordance with Chapter 2 of the Mental Health and Developmental Disabilities Code [405 ILCS 5/Ch. 2].
- b) The right of individuals to confidentiality shall be governed by the Mental Health and Developmental Disabilities Confidentiality Act [740 ILCS 110].
- c) All other applicable local, State and federal mental health laws are fully complied with.
- d) Staff shall inform individuals in writing of the following:
  - 1) Their rights in accordance with subsections (a) and (b) of this Section.
  - 2) Their right to contact the Guardianship and Advocacy Commission, Equip for Equality, Inc. (the agency designated by the Governor under Section 1 of the Protection and Advocacy for Mentally Ill Persons Act [405 ILCS 45/1]), the PMHC's human rights or grievance committee and the Department. On request staff shall offer assistance to individuals in contacting these entities, giving each individual the address and telephone number of the Guardianship and Advocacy Commission, Equip for Equality, Inc., the PMHC human rights or grievance committee and the Department's Quality Care line 1/800-843-6154.
  - 3) This information shall be given to the individuals and guardians, if any, in a language which they understand or in sign language if the individual is hearing impaired.
- e) Individuals or guardians shall be permitted to present grievances and to appeal adverse decisions of the PMHC. This shall be done in accordance with Section 258.530.
- f) Individuals shall not be denied, suspended or terminated from services or have services reduced for exercising any of their rights.

**Section 258.130 Definitions**

For the purposes of this Part, the following terms are defined:

"Act." The Department of Mental Health and Developmental Disabilities Act [20 ILCS 1705].

"Admitting privileges." The privilege to admit an individual for

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treatment to an inpatient setting that is extended to persons who are members of a hospital's medical staff organization and who meet that hospital's credentialing standards and the standards as required by Illinois law.

"Aftercare." The continuation of needed care and services provided to an individual discharged from a State-operated facility in an appropriate setting, with individualized follow-up services.

"Alternative services." Appropriate treatment provided in the community to an individual with a mental illness when there is an assessment determining that hospitalization in a State-operated facility is not necessary.

"Assertive community treatment (ACT)." A specialized service delivery and coordination method and process in which a staff team assumes ultimate accountability for a defined case load with a staff-to-client ratio of 1 to 10 or 15 clients and becomes the single point of responsibility for that case load throughout the clients' tenure in the service system. In this context assertive community treatment means that staff are extremely persevering, on a consistent basis (sometimes insistent), and always energetically persuasive in the face of resistance, negativity, and symptomatic behavior. It means including delivering services in the client's home and local community, but seldom in the office, continuously formulating positive goals with the individual and creating appropriate opportunities for treatment, support, and rehabilitation.

"Assessment." The use of a professionally developed objective approach with which to evaluate the physical, social, developmental, behavioral, psychosocial and other aspects of an individual.

"Authorized representative." The administrative head of an entity appointed by the entity's governing body with overall responsibility for fiscal and programmatic management.

"Case coordinator" or "coordination." The person or mechanism for assuring and coordinating services to meet the individual's needs, including assessment of service needs, development of individualized plans, arrangement for service delivery, advocacy with service providers, and follow-up.

"Clinical psychologist." A person licensed pursuant to the Clinical Psychologist Licensing Act [225 ILCS 15].

"Clinical record." Documentation kept by a facility or community provider concerning the services provided to an individual with mental illness.

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"Clinical social worker." A person who holds a license pursuant to the Clinical Social Work and Social Work Practice Act [225 ILCS 20] authorizing the independent practice of clinical social work in Illinois.

"Code." The Mental Health and Developmental Disabilities Code [405 ILCS 5].

"Communication assistance." Services that enable the individual to communicate effectively with providers. Such services include non-English speaking interpreters, sign language interpreters, augmentative communication devices and assistive listening devices.

"Community provider." A community organization or facility which provides treatment services to individuals with mental illnesses. Such organizations or facilities may have contractual arrangements with the Department to provide such services.

"Community service area." *The established geographic boundaries as defined herein, within which a participating mental health center and other service agencies provide services.* (Section 1-114.4 of the Code)

"Confidentiality Act." The Mental Health and Developmental Disabilities Confidentiality Act [740 ILCS 110].

"Continuity of care." Refers to a systematic approach to the provision of care necessary when needed and where needed, with a relatedness between past, present and future care in conformity with the therapeutic needs of the individual. Individual care is primarily the responsibility of the community provider, regardless of the location of service. Services must be consistent across settings. Continuity of care requires involvement of the community provider in the provision of services in the community, in screening for inpatient admissions, in planning and provision of inpatient treatment, in planning for discharge, and in providing post-hospital care.

"Continuity of care agreement." A written agreement signed by representatives of a community provider and the Department which spells out the respective responsibilities of community providers and State-operated facilities in assuring continuity of care for individuals admitted to, treated in, and discharged from State-operated facilities.

"Day(s)." Calendar days unless otherwise specified.

"Department." The Department of Mental Health and Developmental Disabilities.

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"DCFS." The Department of Children and Family Services.

"Dependent." Any person who relies on the individual being screened as a primary caregiver and who is unable to care for himself or herself. This may include minors, persons with disabilities or parents living with the individual being screened.

"Diagnosis." A category of disorder stated in accordance with either the Classification in Mental Retardation (American Association on Mental Retardation (AAMR), 1719 Kalorama Road, N.W., Washington, D.C. 20009 (1992)), the Diagnostic and Statistical Manual of Mental Disorders, Third Edition, revised (DSM-III-R, American Psychiatric Association (1987)), or the International Classification of Diseases, Clinical Modification, Fourth Edition (ICD-9-CM) (Commission on Professional and Hospital Activities, Edwards Brothers, Ann Arbor, Michigan 48106 (1991)).

"Director." The Director of the Department of Mental Health and Developmental Disabilities.

"Discharge." The full release of an individual from a State-operated facility.

"Facility director." *The chief officer of a mental health facility or his or her designee or the supervisor of a program of treatment, or his or her designee. Designee may include a physician, clinical psychologist, social worker, or nurse.* (Section 1-104 of the Code)

"Family" or "families." A basic unit or constellation of one or more adults and/or children, foster or adoptive parents and children, and private individual guardian(s).

"Formal agreement" or "agreement." The contract or other document entered into between the Department and the participating mental health center which approves and authorizes the entity to function as a participating mental health center.

"Guardian." The court-appointed guardian of the person and/or estate under the Probate Act of 1975 [755 ILCS 5].

"Homeless." Individuals lacking a fixed and regular nighttime residence including individuals whose primary nighttime residence is a temporary shelter, temporary accommodation in the residence of another individual or a place not designated for or ordinarily used as a regular sleeping accommodation (e.g., park, bus station, automobile). The term does not include individual(s) under 21 years of age provided care or services in a facility licensed by DCFS. (Child Care Act of 1969 [225 ILCS 10])



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*"Hospitalization"* or *"hospitalized."* The treatment of an individual by a mental health facility as an inpatient. (Section 1-112 of the Code)

*"Individual."* A recipient of services as defined by Section 1-123 of the Code.

*"Individual integrated services/treatment plan", "services/treatment plan", or "plan."* A written plan which includes an assessment of the individual's strengths and needs, a description of the variety of services needed, regardless of availability, objectives for each service to be provided, the role of the individual or guardian, significant others and the family in the implementation of the plan when indicated, an anticipated timetable for the accomplishment of objectives, and the name(s) of the person(s) responsible for the plan's implementation.

*"Informed consent."* Permission freely granted by an individual who has the legal capacity to give informed consent or legal guardian for the release of information, for participation in services specified or for the use of a specific procedure based on full disclosure to the individual or guardian of the nature of risks and benefits of the proposed services, the alternatives to the proposed services, and the individual prognosis with and without the proposed services.

*"Intake."* The administrative and assessment process for admission to a facility or program.

*"Interdisciplinary process."* A set of steps or a system to assess an individual's strengths and needs, with input from the individual requesting and/or receiving services and from the disciplines providing or targeted to provide services, in order to develop, review and update a service plan.

*"Interdisciplinary team" or "team."* A group consisting of at least the individual, the individual's family (except when an individual who is legally competent or the guardian of an individual who is legally incompetent does not desire the individual's family to participate), the guardian and representatives of the disciplines and services necessary to identify the individual's needs, services and alternatives to meet them. At least one member of the team shall be a qualified mental health professional and, when appropriate in the case of a dual diagnosis, there shall also be a qualified mental retardation professional as defined in the Department's rule at 59 Ill. Adm. Code 115.20.

*"Involuntary admission."* The admission of an individual who has a mental illness and who because of his or her illness is reasonably

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*expected to inflict serious physical harm on himself or herself or another in the near future; or who because of his or her illness is unable to provide for his or her basic physical needs so as to guard himself or herself from serious harm.* (Section 1-119 of the Code)

*"Local area network (LAN)."* A consortium of stakeholders organized for the purpose of facilitating a comprehensive system of care for the Department's priority populations. The local area network brings together key mental health stakeholders to plan, organize, and implement a comprehensive service system within designated geographic areas. The LAN is organized through a steering committee which is facilitated by the coordinating agency(ies). At a minimum the LAN steering committee includes Department funded providers, DCFS funded providers (LANs for children and adolescents only), 1500 Boards (comprehensive community based youth services providers, youth services planning boards; children and adolescents LANs only), Section 17 of the Children and Family Services Act [20 ILCS 505/17] primary and secondary consumers, State-operated facility staff, 708 Boards (local mental health authorities) (the Community Mental Health Act [405 ILCS 201] and 553 Boards (public health departments) [55 ILCS 5/5-25001]. LAN meetings are held to include broad community participation in the local planning. The LAN provides a framework for a unified service system which includes, but is not limited to clarifying which agencies within a geographic area will take responsibility for assessment, triage, and comprehensive treatment, eliminating gaps in service, and improving communication among providers. (Section 5-25001 of the Counties Code)

*"Linkage."* Person-to-person contact between either the individual or the staff at a community provider or at the State-operated facility from which an individual is being discharged and the staff of another community provider which has agreed to provide necessary aftercare services following the individual's discharge or referral to another community provider to assure coordination of aftercare plans and referral of the individual to the community agency.

*"Mandated follow-up."* The statutorily-required monitoring of individuals placed by the Department in licensed long-term care facilities using on-site visits to the facility for the purpose of observing the health, well-being and adjustment of the individual as well as the appropriateness of the services and the suitability of the facility. This monitoring activity must be provided for 12 months following placement, including weekly visits during the first month, or for longer periods as required. (Section 15 of the Act)

*"Medicaid certification."* Certification by the Department's Bureau of Quality Assessment or the DCFS Office of Medicaid Certification that the agency is in compliance with the Department's rules at 59 Ill.

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Agm. Code 132 and may be enrolled by the Department of Public Aid for participation in the mental health Medicaid initiative. Such agencies may receive Medicaid contracts with the Department or DCFS for reimbursement of services.

"Medication." A substance, whether a prescribed or an over-the-counter drug, that is taken by or administered to an individual to treat a physical, emotional, or mental condition.

"Mental health facility." Any licensed private hospital, institution or facility or section thereof, and any facility, or section thereof, operated by the State or a political subdivision thereof for the treatment of individuals with a mental illness and includes all hospitals, institutions, clinics, evaluation facilities, and mental health centers which provide treatment for such persons. (Section 1-114 of the Code)

"Mental illness." A mental or emotional disorder verified by a diagnosis contained in the DSM-III-R or ICD-9-CM or subsequent revisions thereof, which substantially impairs the individual's cognitive, emotional and/or behavioral functioning; excluding V codes, organic disorders such as dementia and those associated with known or unknown physical conditions such as hallucinosis, amnesic disorder, and delirium; psychoactive substance induced organic disorders; and mental retardation or psychoactive substance use disorder. For purposes of this Part, this does not exclude individuals with a dual diagnosis of mental illness and mental retardation or mental illness and psychoactive substance use disorders.

"Moral turpitude." Quality of being inherently base, depraved, vile or wicked.

"Participating mental health center (PMHC)." A community mental health center, other community entity, or child welfare agency providing mental health services, which has entered into a contract or formal agreement with the Department on or after July 1, 1994, to provide screening of individuals for hospitalization in State-operated mental health facilities and for alternative treatment to hospitalization, and other services for individuals with mental illness in a designated community service area. (Section 114.2 of the Code)

"Performance indicator." Measurements that can be used to operationally specify how well an organization is functioning along one or more dimensions that represent agreed upon goals or values of a program. The measures are quantitative, objective and calibrated against some standard(s) that permit comparison within organizations over time and between organizations participating in the program.

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"Physician." Any person licensed by the State of Illinois to practice medicine in all its branches and includes any person holding a temporary license as provided in the Medical Practice Act of 1987 [225 ILCS 60]. (Section 1-120 of the Code)

"Presented." Means an individual who was brought for mental health services to a State-operated facility (SOF) or taken by another person. It includes anyone whom the PMHC was requested to screen at a remote location, including but not limited to emergency rooms, jails, police stations, shelters, State-operated facilities and homes.

"Presenting." An individual comes to a SOF or PMHC seeking mental health services.

"Program." An organized system of services designed to provide for the treatment needs of individuals.

"Psychiatrist." A person, as defined under "Physician" in this Section, who is board eligible or board certified in psychiatry, or who qualifies as a psychiatrist under Section 1-121 of the Code; i.e., is a physician with at least three years of formal training or experience in the diagnosis and treatment of mental illness.

"Qualified certifier." A physician, licensed clinical psychologist (Clinical Psychologist Licensing Act [225 ILCS 15]) or a qualified examiner who is employed or under contract with a participating mental health center for the purpose of providing evaluation and screening for State-operated mental health facilities admissions. (Section 1-114.3 of the Code)

"Qualified examiner." A person who is a licensed clinical social worker (Social Work and Social Work Practice Act [225 ILCS 20]) with a master's or doctoral degree in social work from an accredited graduate school of social work and who has at least three years of supervised post-master's degree clinical social work practice which shall include the provision of mental health services for the evaluation, treatment and prevention of mental and emotional disorders; or a registered nurse (Illinois Nursing Act of 1987 [225 ILCS 65]) with a master's degree in psychiatric nursing who has three years of clinical training and experience in the evaluation and treatment of mental illness which has been acquired subsequent to any training and experience which constituted a part of the degree program. (Section 1-122 of the Code)

"Quality assurance (QA)." A systematic and objective approach to monitoring and evaluating the appropriateness, adequacy and quality of services.

"Registered nurse." A person who is licensed as a professional nurse



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under the Illinois Nursing Act of 1987.

"Screening." The act of evaluating on a face-to-face basis an individual presenting or presented for admission into a State-operated facility for the appropriateness of admission or for alternative treatment.

"Screening, assessment and support services (SASS)." Intensive community-based mental health services funded by both the Department and DCFS which are provided to children who are at risk of or who actually experience hospitalization due to psychiatric reasons. SASS include pre-admission screening services to determine a child's need for psychiatric hospitalization; intensive mental health services for up to 90 days for children determined to not need psychiatric hospitalization; monitoring, discharge linkage and after care planning for children who are hospitalized for psychiatric reasons; and intensive mental health services for up to 90 days for children discharged from psychiatric hospitalization.

"Service area." *The established geographic boundaries as defined by the Department, composed of several community service areas, within which State-operated mental health facilities provide services.* (Section 1.114.5 of the Code)

"Services." Treatment, as defined here in this Section.

"STA." Subject to involuntary admission.

"Significant other(s)." The individual's legal guardian, if one has been appointed, the individual's family, members of the immediate household and close friend(s).

"State-operated facility" or "State-operated mental health facility" or "SOF." *A mental health facility operated by the Department.* (Section 1-114.1 of the Code)

"Statewide Coordinator of Deaf Services." An employee designated by the Department to provide information and assistance relative to the needs of individuals who are deaf, deaf-blind, late deafened, or hard of hearing.

"Termination." The formal discontinuance of mandated follow-up monitoring of individuals placed in licensed long-term care facilities or discontinuance of case coordination for individuals who were previously served in State-operated facilities.

"Treatment." *An effort to accomplish an improvement in the mental condition or related behavior of an individual. Treatment includes,*

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*but is not limited to, hospitalization, partial hospitalization, outpatient services, examination, diagnosis, evaluation, care, training, psychotherapy, pharmaceuticals and other services provided for individuals by mental health facilities.* (Section 1-128 of the Code)

"Undomiciled." Not having a residential address which is assignable to a specific State of Illinois geocode (geographic area). Includes individuals who are permanent residents of other states or countries and "residents" of Illinois who are homeless but who may be assigned a geocode for purposes of the provision of service.

"Uniform screening and referral form (USARF)." A standard form completed by participating mental health centers to summarize the findings and recommendations resulting from a screening for SOF admission or deflections.

"Utilization review." The process of using predefined criteria to evaluate the necessity and appropriateness of admission to and treatment in a program or set of services. This process should not be confused with the utilization review hearings held in accordance with the Department's rule at 59 Ill. Adm. Code 112.10.

"Utilization review hearing." A hearing convened in accordance with the Department's rule at 59 Ill. Adm. Code 112.10 to hear the facts concerning an objection to a denial of admission, objection to a transfer or objection to discharge.

## SUBPART B: PARTICIPATING MENTAL HEALTH CENTER REQUIREMENTS

## Section 258.200 Applicability

This Part shall apply to all public or private agencies, corporations or organizations which seek to be participating mental health centers and are, therefore, subject to Department review.

## Section 258.210 Criteria for application and participation

## a) Medicaid certification

The applicant shall provide evidence of Medicaid certification under the Department's rules at 59 Ill. Adm. Code 132, Medicaid Community Mental Health Services Program, or be a Department-funded community mental health center that is a part of or formally affiliated with a licensed hospital providing psychiatric services, inpatient or outpatient. (Hospital Licensing Act [210 ILCS 85])

## b) Necessary services or linkages

An entity applying for participation as a participating mental health center (PMHC) must make reasonable efforts to assure the provision of

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the services set forth below either directly through its own organization or through written linkage agreements with other entities. The provision of these services must be accessible and should be sufficient to meet the reasonably anticipated needs of the community service area.

- 1) Twenty-four hour crisis response capacity including the ability to provide screening services detailed in Subpart C of this Part and necessary interventions in order to stabilize the crisis;
- 2) Crisis intervention services as described in the Department's rules at 59 Ill. Adm. Code 132;
- 3) Crisis residential services;
- 4) Service needs evaluation or rehabilitation needs assessment, and treatment planning as described in the Department's rules at 59 Ill. Adm. Code 132;
- 5) Outpatient treatment;
- 6) Psychiatric treatment as described in the Department's rules at 59 Ill. Adm. Code 132;
- 7) Access to acute inpatient hospitalization in a community hospital providing psychiatric service;
- 8) Day treatment as described in the Department's rules at 59 Ill. Adm. Code 132;
- 9) Case management services as described in the Department's rules at 59 Ill. Adm. Code 132;
- 10) Access to an array of housing and residential services which may include a range from independent intermittent supervision to a setting with 24-hour on site supervision; and
- 11) Linkage with any assertive community treatment program which may serve the community service area.

c) Psychiatrist services  
The applicant shall assure the availability of services by a psychiatrist as defined in Section 1-121 of the Code, sufficient to meet the level of screening service demand of the community service area.

d) Local area network recommendation  
The applicant shall provide written recommendation from the steering committee of the local area network(s) (LANs) indicating that the applicant has developed the application for PMHC status with the input of the LAN steering committee(s) for adult services and/or children and adolescent services.

e) Continuity of care agreement  
The applicant must have signed the Department continuity of care agreement.

f) State-operated facility bed utilization agreement  
The applicant must provide evidence of completion of preliminary planning with the State-operated facility (SOF) serving the applicant's community service area. Such preliminary planning is to include the specification of SOF bed utilization for the community service area for the past five years and at the time of application,

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and the agreed range of utilization which is anticipated.

- g) Service population  
The preferred service population for one PMHC includes all age ranges. The PMHC may serve adults only, or children and adolescents only, if another PMHC serves the other age range for the designated community service area. In such situations, a written agreement for interagency linkage must be obtained. The preferred PMHC for children and adolescents shall be an agency funded by either the Department or DCFS to provide SASS services.

- h) Written plan for implementation and services  
The applicant shall provide a written plan describing the community service area boundaries to be served, the implementation process and available services. Such plan shall address provisions for subsections (a) through (g) of this Section and implementation or availability of Subpart C and Subpart D of this Part.

## Section 258.220 Application and formal agreement

## a) Application forms

- 1) Applicants shall obtain forms to become PMHCs under this Part by writing to: Department of Mental Health and Developmental Disabilities, ATTN: Participating Mental Health Center Services, Division of Mental Health and Forensic Services, William G. Stratton Building, Suite 400, Springfield IL 62765.

- 2) The application shall require an applicant to certify that it meets the criteria for application and participation as described in Section 258.210. In addition, the application shall request information about:

- A) The applicant including the type of ownership, the names of all owners, partners and stockholders;
- B) Site addresses and telephone numbers; and
- C) The authorized representative for the applicant.

- 3) The authorized representative for the applicant shall sign and date the application forms.

## b) Application acceptance and verification

- 1) Applications or renewals shall be deemed received by the Department on the postmark date.
- 2) The Department shall notify an applicant of any error or omission made in the submission of an application within 30 days after receipt of the application. Failure of the Department to respond shall not constitute a waiver of the requirements. If the applicant fails to respond to the notice within 30 days after its postmark date, the Department shall terminate the application process and notify the applicant within 60 days after the postmark date of the original notice.
- 3) The Department shall either approve or disapprove a completed application within 120 days after its receipt. If an application is incomplete, the Department shall notify the applicant of the



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status.

- c) 4) The Department may verify information supplied in applications. On receipt of a completed application and verification of the applicant's compliance with this Part, the Department shall approve the application and enter into a formal agreement with the applicant which will authorize applicant to act as a participating mental health center as provided in the Code and this Part.
- d) The Department shall negotiate with the applicants to establish reasonable dates on which the agreements shall become effective, to assure an orderly implementation which shall not unduly disrupt current procedures and processes. This process may involve implementation of a limited number of participating mental health centers starting on July 1, 1994, with the exact number to be determined by the Department.
- e) The Department may conduct scheduled reviews of participating mental health centers. The Department shall review the records required under this Part or premises, or both, as it deems appropriate for the purpose of determining compliance with the Code and this Part. Any deficiencies noted shall be responded to by the participating mental health center within 30 days. The response shall be considered as accepted unless the Department indicates otherwise in writing within 30 days after receipt of that response. Reviews of PMHC's shall be coordinated with other review procedures conducted by the Department.
- f) The term of the formal agreement is for one year, with the year beginning on July 1st and ending on June 30th. Initial agreements that are not signed by July 1st shall nonetheless end June 30th.
- g) In the event that multiple agencies submit competing applications to serve as a PMHC for the same population of a community service area, the Department shall enter into a formal agreement with the applicant that the Department determines to be most qualified to provide the necessary services, based on past experience with the providers and the resources available to the providers and the recommendation of the local area network.
- h) Any agency denied a formal agreement to provide PMHC service pursuant to subsection (g) of this Section may appeal the denial in accordance with Section 258.270.

**Section 258.230 Renewal of formal agreement**

- a) On Department notification, each participating mental health center shall submit a signed and dated renewal application at least 120 days prior to expiration of the current agreement if renewal is sought.
- b) PMHCs in compliance with this Part shall be renewed for an additional one-year period.
- c) If the Department does not approve an application for renewal, it shall notify the PMHC in writing 90 days prior to the expiration of the agreement.
- d) Notice of the Department's decision not to renew an agreement shall

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include a clear and concise statement of the reason on which the determination is based and notice of the opportunity for a hearing.

**Section 258.240 Non-transferability of formal agreement**

- a) A formal agreement is not assignable or transferable.
- b) Discontinuation of operations causes the agreement to be void.

**Section 258.250 Withdrawal**

- a) If, at any time, a PMHC determines that it will terminate operation as a participating mental health center, it shall notify the Department of its decision at least 60 days prior to the date of termination.
- b) This notice shall be given to the Department, to service providers working with the PMHC and to the affected court system(s) including the state's attorney and public defender, and to the Guardianship and Advocacy Commission.
- c) The notice shall state the proposed date for cessation and the reason.
- d) The PMHC shall continue to be liable for all actions arising from the duties as a participating mental health center during the timeframe of the contract and shall maintain responsibility for any hearings under Section 258.540 or required court testimony arising from its actions as a participating mental health center.

**Section 258.260 Denial of or revocation of formal agreement**

- a) The Department may deny or revoke an agreement at any time if the PMHC:
  - 1) Fails to comply with the service requirements identified in Subpart C of this Part;
  - 2) Fails to comply with the general agency requirements identified in Subpart B of this Part; or quality assurance requirements identified in Subpart D of this Part;
  - 3) Fails to correct deficiencies identified as a result of an on-site review by the Department;
  - 4) Submits false information either on Department forms or during an on-site review;
  - 5) Refuses to permit or participate in an on-site review;
  - 6) Willfully violates any rights of individuals being served;
  - 7) Fails to comply with the terms of the formal agreement; or
  - 8) Conducts itself so as to present a conflict of interest with the role of a PMHC.
- b) If the Department determines that the health and safety of individuals is at risk, the agreement shall be revoked, at the Department's discretion, as soon as practical while preserving the health and safety of the individuals served by the PMHC. The Department shall immediately take all steps necessary to insure the health and safety of all affected individuals.

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- c) Notice of intent to revoke will be given 90 days prior to the date of revocation, if the health and safety of individuals is not at risk.
- d) The 90 days notice period may be used by the PMHC to correct deficiencies, and on submission of proof of correction, the revocation may be reversed.
- e) The Department shall refuse to enter into an agreement or renew an agreement or shall revoke an agreement with an applicant if the owner and/or authorized representative of the applicant or licensee has been convicted of a felony, or a misdemeanor involving moral turpitude, as shown by a certified copy of the court judgment of conviction.
- f) If a PMHC contests the Department's decision regarding the denial or revocation of the agreement, it can request a hearing pursuant to Section 258.270, by providing written notice of the request.

**Section 258.270 Hearings regarding denial or revocation of formal agreement**

- a) An agreement may not be denied or revoked unless the agency is given written notice of the grounds for the Department's action.
- b) The agency may appeal the Department's proposed action by making a written request to the Director for a hearing within 15 days after the postmark date of the Department's written notice.
- c) The Department shall schedule a hearing within 20 working days after receipt of the request for appeal. The agency shall be notified by registered mail not less than 14 days prior to the date of the hearing. The notice shall include the date, time and place of the hearing and a short statement of the issues to be decided.
- d) The hearing shall be conducted by an administrative law judge authorized by the Director to conduct such hearings.
- e) Prior to the hearing date, the administrative law judge may hold a conference, either personally or by telephone, to resolve or narrow issues.
- f) At the hearing, both parties may present written and oral evidence. The Department shall have the burden of proving that there was substantial evidence of non-compliance with these standards. Substantial evidence is such evidence as a reasonable person can accept as adequate to support a conclusion (i.e., consists of somewhat less than a preponderance of evidence).
- g) The administrative law judge shall issue his or her written decision within 15 working days after the hearing. The decision shall include a statement of facts about the appeal and the administrative law judge's conclusions. Copies of the decision shall be sent to the agency and the Department.
- h) If the agency is not satisfied with the administrative law judge's decision, it may request a review of the decision by the Director or his or her designee. The request must be made in writing to the Director no later than 10 working days after the postmark date of the decision.
- i) On receipt of the request for review, the Director or his or her

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designee shall review the administrative law judge's decision and copies of all documents considered at the hearing. Within 20 working days after receipt of the request for review, the Director or his or her designee shall issue a written decision upholding or reversing the administrative law judge's decision. Copies of the decision shall be sent to the Department and the agency.

- j) The Director's or his or her designee's decision shall constitute a final administrative decision.
- k) If the agency does not request a hearing, or, if after conducting a hearing, the Department determines that the agreement should be denied or revoked, the Department shall issue an order to that effect.

**Section 258.280 Annual directory**

The Department shall annually publish and make available to interested persons and organizations a directory of participating mental health centers. The directory shall include the address, telephone number, and geographic area covered by each participating mental health center.

**SUBPART C: SCREENING AND DISPOSITION SERVICES****Section 258.300 Screening service requirements**

- a) The participating mental health center shall assure that all individuals presenting or presented in their community service area for admission to State-operated facilities are screened. It shall provide the screening service directly or through written agreements with other service providers (e.g., SASS programs) in the community service area.
- b) Screening shall be available on a 24-hour basis, every day of the year. Acknowledgement of the request for screening shall occur within 60 minutes after the request. The face-to-face screening shall be initiated within 90 minutes after the acknowledgement of the request (or in such time as is reasonable to accommodate the geography and service needs of the community service area).
- c) All persons presenting or presented for admission to a State-operated facility shall be screened on a face-to-face basis and the screening shall be completed within four hours after notice of need for screening.
- d) Screening shall be available whenever necessary at sites other than the designated community screening site, based on consumer and service area needs and shall be available for individuals who are homeless wherever they may be located. Screenings shall be conducted in settings which are judged by the qualified certifier to be safe for all parties involved in screening activities.
- e) Staffing composition
  - 1) There shall be adequate qualified personnel to ensure the continuous availability (24 hours per day, every day of the year)



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of face-to-face screening at locations in the community service area as needed.

- 2) Staff qualified to conduct a screening which results in a State-operated facility admissions screening are to be qualified certifiers as defined in Section 258.130.
- 3) Staffing for screenings shall include qualified sign language interpreters on contract to be on call to provide communication assistance in order to assess the mental health status of an individual who is deaf or deaf-blind, or who uses sign language to communicate. Lists of qualified interpreters will be made available by the Department's Statewide Coordinator of Deaf Services for individuals who are deaf and hard of hearing.

f) The screening shall assess:

- 1) The individual's identification of the problem and his or her service needs;
- 2) Signs and symptoms of mental illness;
- 3) Mental status;
- 4) Present level of functioning;
- 5) Dangerousness to self or others;
- 6) History of and current alcohol or substance abuse;
- 7) Estimate of level of intellectual functioning;
- 8) Brief treatment history, current medications, and community agency involvement;
- 9) Recent psychosocial stressors and possible precipitants for the current deterioration;
- 10) Diagnostic impression;
- 11) Preliminary estimate of income;
- 12) Insurance or other hospitalization benefits;
- 13) Criminal charges, if any;
- 14) Social support system;
- 15) Presence of dependents;
- 16) To the extent that information is immediately available to the screener, whether dependent(s) of the individual being screened is at risk based on:
  - A) Reports or evidence of recent or past abuse or neglect of dependent(s), or
  - B) The individual being screened exhibits present or past severe behavioral propensities from which it could reasonably be concluded that dependent are at risk of abuse or neglect;

17) Housing status.

- g) The qualified certifier shall inquire as to the presence of current medical problems which may be further treated in the local community. This provision is in no way a substitute for the regular medical examination which anyone entering a State-operated facility would receive. It is prudent to medically evaluate individuals who are receiving treatment in community facilities.

h) Whenever an individual presents or is presented for admission, the

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screening by the participating mental health center shall determine:

- 1) The individual's symptoms, if any;
- 2) Whether those symptoms could be managed in the community and, if so, by what type of services or combination thereof;
- 3) Whether such services are presently available to the individual;
- 4) If such services are not presently available to the individual, the reason they are not available;
- 5) Whether the individual's symptoms require admission to a State-operated facility; and
- 6) The existence of dependents when a parent or caregiver is screened, and if any exist, whether adequate arrangements have been made for the care of the dependent. If the individual requires hospitalization and such arrangements cannot be made, it is the responsibility of the screening agent to report to DCFS at 1/800/252-2873 in the case of minor dependent(s), or for adult dependents notify other appropriate authorities consistent with Section 11 of the Confidentiality Act.

AGENCY NOTE: These determinations shall be documented in a written record which is subject to the provisions of the Confidentiality Act and which shall be considered in any review of a denial of admission conducted pursuant to Section 3-405 of the Code and Section 258.540.

- i) Participating mental health centers shall use a uniform screening and referral form to be completed for each individual screened for SOF hospitalization regardless of outcome.

- 1) The uniform screening and referral form shall be designed by the Department with input for revision by PMHCs. The form shall be distributed by the Department.
- 2) A copy of the form shall be kept on file as a permanent part of the individual's clinical record at an identified location specified by the PMHC.
- 3) The PMHC shall assure that uniform screening and referral forms are maintained in such a manner that data can be periodically reviewed by the Department for chronological periods such as quarters of and full fiscal years.
- 4) If State-operated facility hospitalization is the outcome of the screening, the original of the uniform screening and referral form shall be provided to the State-operated facilities at the time of admission. The uniform screening and referral form shall be used for the written recommendation for admission to State-operated facilities.
- 5) If SOF hospitalization is the outcome, the uniform screening and referral form shall clearly state why a community alternative was not appropriate, the objective problems to be addressed through in-patient treatment, and the name of the recommended service provider to be responsible for continuity of care during and after hospitalization.
- 6) The original uniform screening and referral form shall be attached to any subsequently filed petition for involuntary

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## j) admission.

If an individual presents or is presented at the SOF for admission without having been screened, the SOF shall contact the PMHC and arrangements shall be made for a screening by the PMHC in a location appropriate for the screening depending upon the individual's clinical condition.

## k) Screening disposition

The screening shall result in a clear case disposition, with one of six possible outcomes, justified in the uniform screening and referral form:

- 1) A finding of no need for treatment;
- 2) A finding of need for appropriate alternative community services, with referral and linkage to that appropriate service;
- 3) A finding of need for acute hospitalization with hospitalization available in a community inpatient setting and with assistance in accessing admission;
- 4) A finding of need for acute hospitalization with hospitalization unavailable in a community inpatient setting, therefore resulting in a finding of need for State-operated facility admission, with a justified written recommendation in the uniform screening and referral form and arrangements made for transport to the State-operated facility;
- 5) A finding of need for State-operated facility hospitalization, with a justified written recommendation in the uniform screening and referral form and arrangements made for transport to the State-operated facility; or
- 6) A finding that the individual could benefit from services, but refuses referral to either a hospital or to appropriate community services and does not meet criteria for involuntary hospitalization.

## Section 258.310 State-operated facility admission criteria

## a) Adult criteria

- 1) On application submitted pursuant to Sections 3-400 and 3-401 of the Code, any individual age 16 or older who applies for admission to a State-operated facility in any community service area that has a participating mental health facility, or who from such community service area applies directly to a State-operated facility, shall be admitted, if and only if:

- A) No services exist within the community service area which are presently available to and appropriate for the individual for treatment and management of the presenting problem and services in other geographic areas that are usually available to the PMHC cannot be accessed; and
- B) Is an individual who is alleged to be subject to involuntary admission by way of a petition; or is alleged to be subject to involuntary admission by way of a petition but who, in

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the opinion of the facility director or his or her designee, may be clinically appropriate for voluntary admission; or is an individual who is presenting for voluntary admission without a petition; and is mentally ill and because of that illness is exhibiting or reasonably expected to exhibit in the near future any of the following:

- i) Dangerous behavior posing a risk to self, others or property such as threats, acts or ideation of harm to self or others, or grossly distorted or inappropriate affect that could put the individual at risk of harm to self or others;
  - ii) Impaired reality testing as manifested by disabling hallucinations, grossly distorted thought processes such as delusions, extreme disorientation or confusion accompanied by disturbed behavior; or
  - iii) Need for ongoing skilled observation due to inability to guard self from serious harm.
- 2) In non-emergencies an adult under the age of 21 shall be accompanied by a certification of need from a team of health care professionals who are independent from the SOF, which is signed by a physician and which certifies that the following regulatory elements are met:
- A) Ambulatory care resources in the community do not meet the needs of the individual;
  - B) Inpatient treatment under the direction of a physician is needed; and
  - C) The services can reasonably be expected to improve the individual's condition or prevent further regression so that services will no longer be needed.

## b) Child and adolescent criteria

- 1) On application submitted pursuant to Sections 3-503 and 3-504 of the Code, any minor for whom application to a State-operated facility is made who resides in a community service area that has a participating mental health center shall be admitted only if:
  - A) No services exist in the community service area which are presently available to and appropriate for the individual for treatment or management of the presenting problem and facilities or services in other geographic areas that are usually available to the PMHC cannot be accessed; and
  - B) The individual is a minor who is being presented on the application of the parent or guardian; or by a person in loco parentis or an interested person 18 years of age or older when, after diligent effort, the minor's parent, guardian or person in loco parentis cannot be located (Section 3-504 of the Code) or is a minor 16 years of age or older seeking voluntary admission, who is mentally ill and because of that illness is exhibiting a serious emotional or behavioral disturbance of an acute nature, requiring and



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likely to be responsive to an intensive level of short-term care available only in a psychiatric hospital with 24-hour access to physicians and nurses. Severe emotional and behavioral disturbance that may be attributable to mental illness and likely to be responsive to psychiatric hospitalization could be characterized by one or more of the following:

- i) Acute disabling symptoms such as impaired reality testing, rapid cognitive decline, formal thought disorder, bizarre or irrational behavior, hallucinations, severely depressed mood, affective lability, or dissociation;
  - ii) Imminent danger to self, others, or property (attributable to primary psychiatric disease);
  - iii) Acute impairment of interpersonal, familial, community, occupational, or academic functioning and/or significant disruption of normal developmental progress; or
  - iv) Necessity for diagnostic procedure available only in the hospital setting, e.g., special drug therapy or continuous skilled psychiatric observation.
- 2) In non-emergencies the minor shall be accompanied by a certification of need from a team of health care professionals who are independent from the SOF, which is signed by a physician and which certifies that the following regulatory elements are met:

- A) Ambulatory care resources in the community do not meet the needs of the individual;
  - B) Inpatient treatment under the direction of a physician is needed; and
  - C) The services can reasonably be expected to improve the individual's condition, or prevent further regression so that services will no longer be needed.
- 3) Inability or unwillingness of the minor's parent or guardian to provide for his or her residence or care shall not be grounds for refusing to seek appropriate less restrictive treatment alternatives.
- c) Medical clearance criteria  
Individuals who require immediate acute or intensive medical care which requires services of medical hospital emergency rooms or inpatient medical settings not available in SOFs shall be referred to a medical hospital and will not be accepted for admission to State-operated facilities until medically stable.
- d) No individual who meets the criteria set forth in subsection (a) or (b) of this Section shall be denied admission to a State-operated facility because of the existence of mental health or related services in the community unless appropriate arrangements have been made for the actual provision of such services.

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- e) In determining whether an individual applying for admission to a State-operated facility meets the above criteria, the state operated facility and PMHC shall, at minimum, consider the availability and appropriateness of the services set forth in Section 258.210(b).
- f) If it is determined that an individual is not in need of treatment, no treatment shall be provided.
- g) If it is determined that an individual is in need of treatment but does not meet the criteria set forth in subsection (a) or (b) of this Section, the applicant shall either be assisted in accessing hospitalization in a community inpatient setting or referred to and linked with appropriate community services as set forth in Section 258.360(a).

**Section 258.320 State-operated facility admission disposition**

- a) If the result of the screening is a recommendation for State-operated facility (SOF) admission, the PMHC qualified certifier shall:
  - 1) Contact the State-operated facility to inform the intake staff of the pending arrival of the individual, prior to the individual's departure for the SOF;
  - 2) Assure that the individual has a safe mode of transportation to the SOF that is appropriate to his or her condition and circumstances. Upon receipt of a petition and certificate prepared pursuant to Chapter III, Article VI of the Code, the county sheriff of the county in which the individual is located shall take the individual into custody and transport to the SOF. The county sheriff may make other arrangements with a public or private entity to transport the individual to the SOF or may delegate the duties to another law enforcement body if that body agrees; and
  - 3) By sealed envelope delivery, assure that the original of the uniform screening and referral form (the written recommendation for admission) and original petition and certificate(s) if completed, are available to the SOF at the time the individual arrives at the SOF.
- b) When an individual is recommended for SOF admission, an SOF physician with admitting privileges must authorize the admission.
  - 1) Adults meeting the criteria for emergency or involuntary hospitalization shall be admitted if they are seeking voluntary admission or if they are accompanied by a petition for involuntary admission, or a petition and valid first certificate, or a petition and two valid certificates.
  - 2) Individuals not meeting the criteria set forth in Section 258.310(a) or (b) may be assessed by the SOF physician as not appropriate for admission.
  - 3) If the qualified certifier recommending admission is a physician with admitting privileges at the SOF, an individual seeking voluntary admission shall be admitted to the SOF.

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- 4) When an individual is recommended for voluntary admission by a qualified certifier who does not have admitting privileges, the individual shall be admitted by the SOF admitting physician unless the individual withdraws the voluntary application for admission or unless, on examination by the SOF admitting physician, serious doubt exists that the individual meets the criteria set forth in Section 258.310.

- c) If serious doubt exists regarding the meeting of admission criteria on examination by the SOF admitting physician, the PMHC will be immediately contacted and a diligent effort will be made for a resolution of the difference of clinical opinion and for appropriate disposition.

- 1) If after diligent effort an acceptable resolution cannot be negotiated, the PMHC and/or the SOF shall request activation of the disposition dispute resolution process as described in Section 258.520.

- 2) While such diligent effort for resolution occurs, the individual seeking voluntary admission shall be admitted on an informal admission status in accordance with Section 3-300 of the Code.

- d) If an individual presents directly to the SOF seeking voluntary admission the SOF shall contact the PMHC to discuss the case. If the PMHC has screened and does not recommend admission of an individual seeking voluntary admission, the SOF shall not admit the individual unless the individual meets the criteria set forth in Section 258.310 based on the SOF's evaluation.

- e) An individual denied admission by the PMHC or the SOF may object to a denial of admission through the utilization review process described in Section 258.530.

**Section 258.330 Court-ordered admissions**

On occasion the court may find that an individual requires examination, or detention and examination, prior to a court hearing to determine need for involuntary commitment. Courts may also hold hearings and order an individual involuntarily hospitalized at an SOF prior to the individual being admitted at the SOF. If the individual is being considered for detention for examination or for involuntary commitment at a State-operated facility, the individual shall be screened by the PMHC. The court may require an examination from another source in addition to the screening.

- a) Participating mental health centers shall assure the availability of screening services for SOF admissions, to the court or courts to which their geographic area relates.

- b) Screening services shall be available to the court prior to detention for examination at an SOF or prior to a court ordered involuntary commitment.

- c) Courts may issue orders for detention and examination at SOFs or may order involuntary commitment to SOFs prior to the occurrence of a screening by a PMHC. If this occurs, the PMHC shall conduct the

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screening as soon as possible after the admission, but within 24 hours, at the SOF. Results of the screening shall be made available to the SOF and the court.

**Section 258.340 Admission of individuals alleged to be subject to involuntary admission**

- a) Participating mental health centers shall have the capability and shall be available to screen all individuals alleged to be subject to involuntary admission prior to SOF admission.

- b) Individuals alleged to be subject to involuntary admissions (SIA) at an SOF shall be screened by the participating mental health center, either (and preferably) before admission to the SOF or, if that is not possible, within 24 hours after admission to the SOF.

- c) Diligent efforts must be made to develop working relationships with all entities involved in the admission process of individuals who are alleged to be SIA and to inform all entities of the availability and desirability of PMHC screening of individuals who are alleged to be SIA in order to assure treatment in the least restrictive setting possible. Entities include (but may not be limited to) the courts, officers of the courts, police agencies, community hospitals, and community mental health service providers.

- d) Involuntary admission process

- 1) Individuals may present or be presented to the PMHC for screening for SOF admission without a completed petition or petition and first certificate and may be objecting to hospitalization. If it appears to the screeners that admission is possible, the individual being screened shall be advised of his or her rights under Section 3-208 of the Code, orally or in sign language and in writing. If the screening indicates that hospitalization is necessary, the qualified certifier shall obtain the petition from an appropriate witness and complete the first certificate prior to transportation of the individual to the State-operated facility.

- 2) Individuals may present or be presented to the PMHC for screening for SOF admission with a completed petition for involuntary hospitalization. The individual being screened shall be advised orally or in sign language and in writing, by the qualified certifier, of his or her rights under Section 3-208 of the Code. If the screening indicates that involuntary hospitalization is necessary, the qualified certifier shall complete the first certificate prior to transportation of the individual to the State-operated facility.

- 3) Individuals may present or be presented to the PMHC for screening with a completed petition and a completed first certificate. If the qualified certifier is a psychiatrist as defined by Section 1-121 of the Code, he or she shall complete the second certificate if the results of the screening so indicate and after



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- advising the individual of his or her rights under Section 3-208 of the Code.
- 4) If an individual presents or is presented to the PMHC for screening with a petition only, and the qualified certifier determines that involuntary hospitalization is not appropriate due to the availability of appropriate alternative community treatment, the PMHC shall arrange for such alternative treatment. Arrangements shall be made for the next working day by firm referral that specifies the name of the person referred to, date, time and place or shall be made immediately if the individual requires immediate crisis intervention.
  - 5) If an individual presents or is presented to the PMHC for screening with a petition and completed certificate which has not yet been filed with the circuit court, and the qualified certifier determines through the screening that involuntary hospitalization is not needed due to the availability of appropriate alternative community treatment the qualified certifier shall:
    - A) Contact the qualified examiner, physician or clinical psychologist who completed the first certificate and communicate the availability of the alternative treatment and the reasons why the alternative is viewed as appropriate;
    - B) Attempt to obtain the agreement of the qualified examiner, physician or clinical psychologist who completed the first certificate for use of the community alternative rather than hospitalization at the State-operated facility;
    - C) If the qualified examiner, physician or clinical psychologist who completed the first certificate agrees, the individual shall be enrolled in the community alternative; and
    - D) If the qualified examiner, physician, or clinical psychologist who completed the first certificate is unalterably opposed to an alternative to hospitalization in a SOF, the qualified certifier shall complete the uniform screening and referral form with the recommendation for alternatives to hospitalization and shall forward it along with the individual to the State-operated facility for review by the SOF admission psychiatrist who shall examine the individual for appropriateness for completion of the second certificate.
  - 6) Individuals on whom a petition or petition and first certificate have been completed may bypass the PMHC screening under certain conditions:
    - A) When an individual presents such a danger that transportation to a screening site would result in significant additional risk to the individual or those who have him or her in custody and the qualified certifier

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- cannot reasonably travel to the location of the individual; or
- B) When, after a diligent effort, a qualified certifier cannot be located to conduct the screening.
- 7) When PMHC screening is bypassed and the individual is transported to the SOF:
    - A) The State-operated facility staff shall immediately inform the PMHC; and
    - B) The PMHC qualified certifier shall conduct the screening at the State-operated facility as soon as possible (but within 24 hours) in order to provide information to the SOF psychiatrist prior to the completion of the second certificate.
  - 8) Whenever a screening has occurred which involves an individual who is alleged to be subject to involuntary admission (i.e., a petition and valid certificate have been completed) and the individual has been admitted to a State-operated facility, the information and recommendations of the screening shall be provided to the court to be available for any subsequent court hearing. The court may require the physical presence and testimony of the petitioner and/or qualified certifier in such hearings.
  - 9) The qualified certifier shall inform the court of the appropriateness of the option of involuntary community treatment (alternative treatment) as described in Section 3-812 of the Code.

**Section 258.350 Court Linkage**

Prior to implementation of screening by a PMHC in a specific geographic area, the PMHC shall develop and implement a plan for:

- a) Informing the courts (i.e., the clerk and officers of the court) and police agencies of the pending availability of the screening process that may be in conjunction with the Department;
- b) Developing working relationships with the courts to facilitate the screening process; and
- c) Providing assistance to the courts to assure that the courts and officers of the courts can effectively implement their responsibilities.

**Section 258.360 Linkage and continuity of care**

- a) When an individual is screened by the PMHC for SOF admission and the result of the screening is a finding that admission is not appropriate, the participating mental health center shall offer appropriate services for the individual's level of clinical need and, if the individual accepts the offer, the individual shall be formally linked to the necessary services. If services are necessary but

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immediate contact is not clinically necessary the person shall be seen by the community provider the next working day. To determine whether immediate contact is clinically necessary, the PMHC shall consider factors which may prevent linkage including access to transportation, familiarity with location, ease with which the individual can be contacted, conflicts with existing appointments and the individual's history of following through with services. For individuals who are homeless and mentally ill, immediate contact with services is always clinically necessary. In all cases, the service provider shall diligently seek to engage the individual in the clinically necessary service. Reasons for failure to see the individual by the next working day shall be documented in the individual's file.

b) When an individual is screened and admitted to an SOF, the PMHC shall notify the current community service provider(s) (if other than the PMHC) or that section of the PMHC that has or shall have continuing care responsibility for the individual admitted. The current community service provider or section of the PMHC that has or shall have continuing care responsibility shall contact the SOF the next working day and shall:

- 1) Participate as active members of the SOF treatment team;
- 2) Participate in the first individual master treatment plan development meeting;
- 3) Participate in other planned treatment team meetings (or special treatment team meetings) as deemed necessary;
- 4) Actively participate in the ongoing treatment process through periodic face to face contact with the individual during his or her stay in the SOF;
- 5) Participate in discharge and aftercare planning including plans related to housing as well as community mental health treatment;
- 6) Assure that face to face treatment services commence in accordance with the discharge plan as soon as clinically appropriate, but in no case more than five days following discharge; and
- 7) Document treatment activities in the SOF clinical record, including the plan for post discharge community services.

**Section 258.370 Confidentiality**

To insure that the individual's rights are protected and that all services provided to individuals comply with the law, participating mental health centers shall ensure that:

- a) The rights of individuals shall be protected in accordance with Chapter 2 of the Code.
- b) The right of individuals to confidentiality shall be governed by the Confidentiality Act. The Confidentiality Act provides in Section 9.2 that for the purposes of continuity of care, the Department and community agencies funded by the Department may disclose an individual's record or communications, without consent, to each other,

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but only for the purpose of admission, treatment planning or discharge. Entities shall not redisclose any personally identifiable information, unless necessary for admission, treatment planning, or discharge of the identified individual to another setting.

**Section 258.380 Clinical records**

- a) The participating mental health center shall ensure the confidentiality of individuals' records in accordance with the Confidentiality Act and shall ensure safekeeping of all records maintained by it against loss or destruction.
- b) The PMHC shall maintain a clinical record for each individual screened which shall conform to the record keeping requirements of the Department's rules at 59 Ill. Adm. Code 132.

**Section 258.390 Service area boundaries, community service area boundaries and requirements**

a) The Department may divide the State into districts and may change these area boundaries as appropriate and necessary for the purpose of regulating admission and transfers of individuals to State-operated facilities for the mentally ill. (Section 8 of the Act) For the purpose of this Part those districts shall be equivalent to service areas.

b) Geographic divisions

Under Title II of the Mental Retardation Facilities and Community Mental Health Centers Construction Act of 1963 (42 U.S.C. 6000 (1993)), the Department is required to establish planning areas for the delivery of community mental health services. These planning areas are used to plan and develop a network of services among existing providers, to identify gaps in service provision, to develop programs to fill the gaps of highest priority, and to develop a local funding base, as evidenced by the Department's rules at 59 Ill. Adm. Code 103. In the rural areas of the State, these areas are composed of several counties; in the most heavily populated urban areas, single counties are divided into multiple planning areas.

c) For the purposes of this Part, the community service areas shall be established to integrate with the local area network of existing service providers for adults and for children and adolescents and shall be composed of planning areas as set forth in subsection (b) of this Section. When necessary the Department may make modifications of the composition of the planning areas and local area networks to reflect the demographic and community profiles of the area, including community consensus, and how the community service area will conform to other political subdivisions; for example, to provide increased integration of children and adolescent services, the geographic boundaries for a PMHC screening children and adolescents may conform to DCSF youth service areas. For rural areas of the State, the



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community service area will be composed of contiguous counties or portions thereof; in more densely populated urban areas, the community service areas may consist of one or more planning areas, as established in subsection (b) of this Section in a given county.

- d) The Department shall annually publish a list of community service areas indicating their geographic boundaries and their relationship to local area networks and the LANs geographic boundaries.

**Section 258.400 Responsibility for undomiciled individuals and individuals from a geographic area other than that served by the participating mental health center**

- a) Admission screening by the participating mental health center shall take place for any individual who presents or is presented for screening, without regard to whether the individual is homeless, resides outside of the State or resides outside of the PMHC's geographic area of responsibility.
- b) If an individual is without an identifiable point of residence (i.e., is homeless) and has no current identifiable service provider, the PMHC and its associated service providers shall provide community crisis intervention services or continuity of care services in the SOF to which the individual may be admitted as if the individual were living in a stable residence in the PMHC's geographic area.
- c) If an individual who is homeless and mentally ill and has no current service provider requires services beyond crisis intervention services, the PMHC shall link the individual to a community provider based on the following:
- 1) When community mental health services will most likely be delivered based upon the individual's stated preference;
  - 2) The neighborhood where the individual typically stays;
  - 3) Where the individual's significant support network is located; and
  - 4) The PMHC.
- d) If the individual with mental illness who is without an identifiable point of residence (i.e., homeless) has a current service provider outside of the PMHC's geographic area, the PMHC's responsibility shall be to arrange continuity of care services with that service provider as described in subsection (c) of this Section for individual's arrangements outside of the PMHC's community service area. In making such arrangements the PMHC shall first consider the individual's personal preferences as to the location of the provider who will provide continuity of care services.
- e) If an individual is screened who resides in a geographic area other than that of the participating mental health center, the following shall apply:
- 1) If the individual does not require SOF hospitalization but does require immediate crisis services, those services shall be provided until the individual's care can be assumed by the

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responsible agency from the individual's geographic area of residence;

- 2) If the individual does not require SOF hospitalization or crisis service, then he or she shall be referred and linked to the responsible service provider from the geographic area of residence;
- 3) If the individual requires SOF hospitalization, the PMHC shall proceed in accessing SOF hospitalization; or
- 4) If the individual requires services of any kind, the screening PMHC shall inform the responsible agency (and the PMHC for the responsible agency's community service area if such PMHC exists) of the disposition determination in these circumstances, within 24 hours or on the next working day of the agency to be notified, and shall confirm the disposition in writing.

**Section 258.410 Interagency linkages**

In geographic areas in which multiple mental health service providers exist, the participating mental health center shall have written linkage agreements with all DMHDD funded providers, with the LAN steering committee (adult LAN and children and adolescents LAN), and with other service providers as necessary, to assure that a full range of alternative mental health services is available to individuals who are screened for SOF admission. Such interagency agreements shall specify:

- a) The nature of the services provided;
- b) The criteria for enrollment in the services;
- c) Procedures to be used by the PMHC to access the services; and
- d) A mechanism for ongoing communication and cooperation between the PMHC and the other service provider.

## SUBPART D: QUALITY ASSURANCE

**Section 258.500 Quality assurance requirements and performance indicators**

- a) The participating mental health center shall develop and implement a quality assurance plan for screening which shall include initial and continuing training requirements for all screening staff covering service delivery legal issues and consumer sensitivity. The quality assurance plan shall be approved by the Department.
- b) The Department shall monitor the quality of screening services on a periodic basis, at least annually, and shall require the development and implementation of plans of correction when quality assurance indicators indicate that established thresholds are not being met. The Department shall request data from PMHCs for the purpose of evaluation of PMHC performance as frequently as is necessary. Such data requests may be more frequent during the initial phases of implementation when interim reports are to be compiled.
- c) The quality assurance plan shall establish PMHC specific screening and

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deflection indicators which measure quality of care or service. Such indicators may be changed from time to time as various aspects of care or service are identified as warranting monitoring. PMHCs shall provide quality assurance reports to the Department on a periodic basis as requested by the Department.

- d) Primary and secondary consumer satisfaction shall be a required quality assurance indicator.
- e) The Department, with input from community providers, interest groups and consumers, shall establish system-wide performance indicators for participating mental health centers which shall measure the effectiveness of screening and deflection services. Performance indicators may be changed from time to time by the Department after receiving input from PMHCs. Performance indicator data shall be provided to the Department as requested.
- f) Participating mental health centers and SOFs shall maintain performance records to include the following:
  - 1) On a periodic basis, to be established by the Department, and at least annually, each participating mental health center shall provide a written report to the Department containing the following information for the preceding fiscal year:
    - A) The number of individual(s) presenting or presented for admission to a State-operated mental health facility;
    - B) The number of individual(s) recommended for admission to a State-operated mental health facility;
    - C) The number of individual(s) offered other mental health services and an accounting by category of the types of others services offered and provided;
    - D) The number of individual(s) denied mental health services;
    - E) The number of individual(s) recommended for admission to a State-operated mental health facility solely because community mental health services which the qualified certifier deemed appropriate for those individuals were not actually available for them;
    - F) The number of individual(s) in each of the above categories who were undomiciled at the time of their evaluation; and
    - G) The living arrangements of the individual at the time of the screening.
  - 2) On a periodic basis, to be established by the Department, and at least annually, each State-operated mental health facility shall provide a written report to the Director of the Department of Mental Health and Developmental Disabilities containing the following information:
    - A) The number of individuals presenting to the SOF who were not screened by the PMHC;
    - B) Whether the individual was admitted to the facility;
    - C) Whether the individuals who were admitted were recommended for admission to the facility by a qualified certifier;
    - D) Regardless of whether the individual was admitted to the

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facility, the alternative mental health services which were considered by the facility;

- E) If the individual was not admitted, the reason for that decision and the alternative mental health services offered or provided to the individual; and,
- F) If no mental health services were offered or provided to the individual, the reason that no services were offered or provided.

- 3) The Department shall annually publish and make available to interested persons and organizations a report containing the information specified in subsections (f)(1) and (f)(2) of this Section. During the initial period of implementation, the Department may publish interim reports covering shorter time periods.
- 4) The Department may contract with an outside independent party to conduct an evaluation of the impact of the PMHC system on mental health services in Illinois. Such outside party shall have access to all relevant Department and PMHC data bases for the purpose of the evaluation.

## Section 258.510 Contract dispute resolution

If there is a dispute related to the written contractual agreement between the PMHC and the State-operated facility or the Department, the authorized PMHC representative and the facility director or their designees shall meet to discuss their differences and reach a resolution. If after diligent effort a resolution cannot be reached or if the dispute is between the PMHC and the Department, the authorized PMHC representative and the Director, or their designees, shall meet to discuss their differences and reach a resolution regarding the contractual dispute.

## Section 258.520 Disposition dispute resolution process

- a) If, after diligent effort, an acceptable resolution of a difference in clinical opinion regarding the appropriateness of SOF admission between the PMHC and the SOF cannot be negotiated pursuant to Section 258.320, the PMHC may request disposition dispute resolution. Pending the outcome of the disposition dispute resolution, the individual may elect to be admitted to the State-operated facility on an informal status as provided in Section 3-300 of the Code. The disposition dispute resolution process involves the review of the findings of the qualified certifier who recommended admission, and the findings of the SOF clinical staff who determined that the individual was not appropriate for hospitalization, by an independent third party clinician agreed upon in advance by both the PMHC and the SOF. Such independent third party clinician shall be identified, selected and jointly funded by the PMHC and the SOF, and shall be identified at the time of application for PMHC status.



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- b) The decision for admission, continued admission, or discharge from informal status made by the independent third party clinician shall be accepted by the PMHC and the SOF in all but the most extreme circumstances. The decision of the third party clinician shall be issued within one working day after being called on after a thorough review of the clinical issues presented by the individual requesting admission and of the alternative forms of treatment that are actually available for the individual.
- c) In the extreme circumstance that either the PMHC or the SOF adamantly disagrees with the decision of the third party clinician, the PMHC or SOF may request a review of that decision by the Department's Director or his or her designee. The decision of the Director shall be final.
- 1) Such request to the Director or his or her designee must be submitted within two working days after the third party clinician's communication of his or her decision to the PMHC and the SOF.
  - 2) With such written request, the PMHC shall submit all relevant written documentation regarding the screening and admission recommendation and the SOF shall submit all written documentation regarding the difference in clinical opinion on the appropriateness of admission and the findings of the third party clinician.
  - 3) The Director or his or her designee shall review the facts as presented and render a decision within five working days after receipt of the request and the supporting documentation.

## Section 258.530 Utilization review hearings

An individual denied admission to a State-operated facility may request a utilization review hearing of that decision, as permitted by Section 3-207 of the Code and the Department's rule at 59 Ill. Adm. Code 112.10. The participating mental health center shall comply with the requirements of a utilization review hearing, as required by Section 3-207 of the Code and the Department's rule at 59 Ill. Adm. Code 112.10.

## Section 258.540 Complaint investigation

- a) PMHCs shall have a formal policy and procedure on presentation of grievances and complaints for investigation and resolution.
- b) Individuals, their significant others, or their guardians shall be permitted to present complaints regarding the process or results of a screening to the participating mental health center for investigation and resolution.
- c) On receiving a complaint, the PMHC shall investigate the allegations of the complaint and, based upon those findings, try to resolve the complaint.
- d) Participating mental health centers shall keep a file of all complaints, investigation findings and resolutions. This file shall

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- e) This Section does not intend to prohibit or in any way interfere with the ability of the individual, or his or her guardian or significant other, to lodge a complaint against a participating mental health center with the Department or any other agency or entity. Individuals presenting complaints shall not have their rights infringed upon or interfered with because of making such complaint. If an individual or his or her guardian lodges a complaint against a PMHC with the Department, the Department shall investigate the complaint and may conduct a review as provided in Section 258.220(e). Failure to permit or participate in a review may result in a revocation of the agreement as provided in Section 258.260(a).

## DEPARTMENT OF NUCLEAR SAFETY

## NOTICE OF ADOPTED AMENDMENT

- 1) Heading of the Part: Radiation Safety Requirements For Industrial Radiographic Operations

- 2) Code Citation: 32 Ill. Adm. Code 350

<u>Section Number:</u>	<u>Adopted Action:</u>
350.30	Amendment
350.1020	Amendment
350.1040	Amendment
350.2010	Amendment
350.2030	Amendment
350.2040	Amendment
350.3010	Amendment
350.3045	Amendment
APPENDIX A	Repeal

- 4) Statutory Authority: Implementing and authorized by the Radiation Protection Act of 1990 [420 ILCS 40].

- 5) Effective Date of Amendments: June 12, 1995

- 6) Does this rulemaking contain an automatic repeal date? No

- 7) Does this amendment contain incorporations by reference? No

- 8) Date filed in Agency's Principal Office: June 9, 1995

- 9) Notice of Proposal Published in the Illinois Register:

September 30, 1994 (18 Ill. Reg. 14535)

- 10) Has JCAR issued a Statement of Objections to these Amendments? No

- 11) Differences between proposal and final version:

- a) In Question #3 of the Notice Page by changing the action for Section 350.3045 from "New Section" to "Amendment".

- b) In the Source Note by inserting an entry for "expedited correction at 18 Ill. Reg. 10943, effective May 2, 1994" following the entry for May 2, 1994.

- c) In the Table of Contents, by enclosing "Repealed" in parenthesis following the "APPENDIX A" heading.

- d) By changing in all of the Source Notes, the Illinois Register volume number from "18" to "19".

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## NOTICE OF ADOPTED AMENDMENT

- e) In Section 350.2010(d)(1) and (2) by moving to the proper indent level.

- f) In Section 350.2010(d)(1), on line 2, by changing "radiographer's" to "radiographer".

- g) In Section 350.2010(d)(2), on line 1, by changing "radiographer's" to "radiographer".

- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes

- 13) Will these amendments replace an emergency amendment currently in effect?  
No

- 14) Are there any amendments pending on this Part? No

- 15) Summary and Purpose of Amendments: This amendment will: (1) incorporate the requirements that industrial radiography licensees and registrants use only certified personnel; (2) change the reference of "radiographer's assistants" to "radiographer trainees" to be consistent with the terminology used in 32 Ill. Adm. Code 405; (3) change the minimum survey instrument calibration interval from 3 months to 6 months; (4) change the minimum interval for radiographer audits from 3 months to 12 months for those individuals who regularly conduct industrial radiographic operations; (5) require job performance audit for those individuals who have not performed industrial radiographic operations for more than 6 months; (6) provide relief to individuals performing radiography with sealed sources from the alarm rate meter requirement for operations at permanent radiography installations; and (7) repeal Appendix A.

- 16) Information and questions regarding these amendments shall be directed to:

Robert B. Holtsclaw  
Staff Attorney  
Department of Nuclear Safety  
1035 Outer Park Drive  
Springfield, Illinois 62704  
(217) 524-1003 (voice)  
(217) 782-6133 (TDD)

The full text of the Adopted Amendments begins on the next page:



## DEPARTMENT OF NUCLEAR SAFETY

## NOTICE OF ADOPTED AMENDMENT

TITLE 32: ENERGY  
CHAPTER II: DEPARTMENT OF NUCLEAR SAFETY  
SUBCHAPTER b: RADIATION PROTECTION

## PART 350

## RADIATION SAFETY REQUIREMENTS FOR INDUSTRIAL RADIOGRAPHIC OPERATIONS

## SUBPART A: GENERAL PROVISIONS

Section	Purpose
350.10	Scope
350.20	Incorporations by Reference
350.25	Definitions
350.30	Exemptions
350.40	Receipt, Transfer and Disposal of Sources of Radiation

## SUBPART B: EQUIPMENT CONTROL

Section	Requirements for Radiography Equipment Using Radiographic Exposure Devices
350.1000	Requirements for Radiography Equipment Using Radiation Machines
350.1005	Limits on Levels of Radiation for Radiographic Exposure Devices, Source Changers and Transport Containers
350.1010	Locking of Sources of Radiation
350.1020	Permanent Storage Precautions
350.1030	Radiation Survey Instruments
350.1040	Testing for Leakage or Contamination, Repair, Tagging, Opening, Modification and Replacement of Sealed Sources
350.1050	Quarterly Inventory
350.1060	Utilization Logs
350.1070	Inspection and Maintenance
350.1080	Permanent Radiographic Installations

SUBPART C: PERSONAL RADIATION SAFETY REQUIREMENTS FOR RADIOGRAPHERS AND RADIOGRAPHERS-IN-TRAINING

Section	Training and Testing
350.2010	Operating and Emergency Procedures
350.2020	Personnel Monitoring Control
350.2030	Supervision of Radiographers--Assistants Radiographer Trainees

## SUBPART D: PRECAUTIONARY PROCEDURES IN RADIOGRAPHIC OPERATIONS

Section	Access Control and Security
350.3010	

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350.3020	Posting
350.3030	Radiation Surveys and Survey Records
350.3040	Records Required at Temporary Job Sites
350.3045	Operating Requirements
350.3048	Notification of Incidents
350.3050	Special Requirements and Exemptions for Enclosed Radiography Systems
350.3060	Special Requirements and Exemptions for Enclosed Radiography Systems, other than those Described in Section 350.3050 that are Designed to Allow Admittance of Individuals (Repealed)
350.3070	Special Requirements and Exemptions for Certified and Non-Certified Cabinet X-Ray Systems Designed to Exclude Individuals (Repealed)
350.3080	Special Requirements for Mobile or Portable Radiation Machines (Repealed)
350.3090	Special Requirements for Underwater and Lay-Barge Radiography
350.4000	Prohibitions
350.4010	Licensing and Registration Requirements for Industrial Radiographic Operations
350.4020	Radiation Safety Officer
350.4030	Reciprocity

APPENDIX A	Subjects to be Covered During the Instruction of Radiographers (Repealed)
APPENDIX B	General Requirements for Inspection of Industrial Radiographic Equipment
APPENDIX C	Retention Requirements for Records

AUTHORITY: Implementing and authorized by the Radiation Protection Act of 1990 [420 ILCS 40].

SOURCE: Filed and effective April 20, 1974, by the Department of Public Health; transferred to the Department of Nuclear Safety by P.A. 81-1516, effective December 3, 1980; codified at 7 Ill. Reg. 14744; recodified at 10 Ill. Reg. 11265; amended at 10 Ill. Reg. 17287, effective September 25, 1986; amended at 13 Ill. Reg. 13592, effective August 11, 1989; amended at 18 Ill. Reg. 7263, effective May 2, 1994; expedited correction at 18 Ill. Reg. 10943, effective May 2, 1994; amended at 19 Ill. Reg. 8250, effective

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## SUBPART A: GENERAL PROVISIONS

## Section 350.30 Definitions

As used in this Part, the following definitions apply:

"ALARA" means as low as is reasonably achievable as defined in 32 Ill. Adm. Code 310.20.

"Associated equipment" means equipment used in conjunction with a

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radiographic exposure device to make radiographic exposure where such equipment drives, guides, or comes into contact with the source (i.e., guide tube, control tube, crank, removable source stop, "J" tube).

"Cabinet radiography" means industrial radiography conducted in an enclosure or cabinet so shielded that doses to individual members of the public at every location on the exterior meet the limitations specified in 32 Ill. Adm. Code 340.310(a).

"Cabinet x-ray system" means an x-ray system with the x-ray tube installed in an enclosure which, independent of existing architectural structures except the floor on which it may be placed, is intended to contain at least that portion of a material being irradiated, provide radiation attenuation and exclude personnel from its interior during generation of x radiation. Included are all x-ray systems designed primarily for the inspection of carry-on baggage at airline, railroad and bus terminals and in similar facilities. An x-ray tube used within a shielded part of a building or x-ray equipment which may temporarily or occasionally incorporate portable shielding is not considered a cabinet x-ray system.

"Collimator" means a radiation shield of lead or other heavy metal which is placed on the end of a guide tube or directly onto a radiographic exposure device to restrict the size and shape of the radiation beam when the sealed source is moved into position to make a radiographic exposure.

"Crank-out device" means the cable, protective sheath and handcrank used to move the sealed source from the shielded to the unshielded position to make an industrial radiographic exposure.

"Enclosed radiography" means industrial radiography conducted in an enclosed cabinet or room and includes cabinet radiography and shielded-room radiography.

"GED" means general equivalency diploma.

"Industrial radiography" means the process used to perform the examination of the macroscopic structure of materials by non-destructive methods using radioactive material or radiation machines.

"Ray-barge radiography" means industrial radiography performed on any water vessel used for laying pipe.

"Tixiscope" means a portable light-intensified imaging device using a sealed source.

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"Lock-out survey" means a radiation survey performed to determine that a sealed source is in its shielded position. The lock-out survey is performed before moving the radiographic exposure device or source changer to a new location. The lock-out survey is also performed when securing the radiographic exposure device or source changer against unauthorized removal.

"Permanent radiographic installation" means an installation or structure designed or intended for radiography and in which radiography is regularly performed.

"Permanent use or storage location" means a location listed on a radioactive material license or a certificate of registration where sources of radiation are used or stored.

"Personal supervision" means the provision of guidance and instruction to a ~~radiographer's assistant~~ radiographer trainee by a radiographer who is:

physically present at the site;  
in visual contact with the ~~radiographer's assistant~~ radiographer trainee while the ~~assistant~~ trainee is using sources of radiation; and  
in such proximity that immediate assistance can be given if required.

"Radiation safety officer" means an individual who is both designated as a radiation safety officer in accordance with Section 350.4020 and who meets the requirements of Section 350.4020 and 32 Ill. Adm. Code 310.20.

"Radiographer" means any individual who performs or personally supervises industrial radiographic operations. Radiographers shall meet the requirements of Section 350.2010(a) and shall comply with the requirements of 32 Ill. Adm. Code: Chapter II, Subchapters b and d, all license conditions, if any, and orders of the Department.

~~"Radiographer's assistant" means any individual who, under the personal supervision of a radiographer, uses sources of radiation related to handling, tooling, or radiation survey instruments in industrial radiography. Radiographer's assistants shall meet the requirements of Section 350.2010(b) and shall comply with the requirements of 32 Ill. Adm. Code: Chapter II, Subchapters b and d, all license conditions, if any, and orders of the Department."~~

"Radiographer trainee" means any individual who uses sources of radiation and related handling tool or radiation survey instruments under the personal supervision of a radiographer. Radiographer trainees shall meet the requirements of Section 350.2010(b) and shall



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comply with the requirements of 32 Ill. Adm. Code: Chapter II, Subchapters b and d, all license conditions, if any, and orders of the Department.

"Radiographic exposure device" means any instrument containing a sealed source fastened or contained therein, in which the sealed source or shielding thereof may be moved or otherwise changed from a shielded to an unshielded position for purposes of making a radiographic exposure (i.e., camera).

"Sealed source" (i.e., pill) means any capsule or matrix as defined in 32 Ill. Adm. Code 310.20.

"Shielded position" means the location within the radiographic exposure device or storage container which, by manufacturer's design, is the proper location for storage of the sealed source.

"Shielded-room radiography" means industrial radiography conducted in a room so shielded that doses to individual members of the public at every location on the exterior meet the limitations as specified in 32 Ill. Adm. Code 340.310(a) (i.e., bay, bunker, cell).

"Source assembly" means a component to which the sealed source is affixed or in which the sealed source is contained. The source assembly includes the sealed source (i.e., pigtail).

"Source changer" means a device designed and used for replacement of sealed sources in radiographic exposure devices, including those source changers also used for transporting and storage of sealed sources.

"Storage container" means the structure in which sealed sources are secured and stored at a permanent storage location as described in Section 350.4010(d)(1).

"Temporary job site" means any location that is not specifically listed on a radioactive material license or certificate of registration where industrial radiography is performed for 180 days or less during any consecutive 12 months.

"Transport container" means a package that is designed and constructed to provide radiation safety and security when sealed sources are transported and meets all applicable regulations of the U.S. Department of Transportation.

"Underwater radiography" means industrial radiography performed when the radiographic exposure device and related equipment are beneath the surface of water.

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(Source: Amended at 19 Ill. Reg. 8250, effective JUN 12 1995)

## SUBPART B: EQUIPMENT CONTROL

## Section 350.1020 Locking of Sources of Radiation

- a) Each radiographic exposure device, source changer and storage container shall be kept locked at all times except when under the direct surveillance of a radiographer or ~~radiographer's assistant~~ radiographer trainee, or as authorized pursuant to Section 350.3010.
- b) Each radiographic exposure device and source changer shall be locked and the key removed from any keyed lock prior to being moved or transported and also prior to being stored at a given location.
- c) Each sealed source shall be secured in its shielded position by locking the radiographic exposure device or source changer each time the sealed source is returned to its shielded position.
- d) Radiation machines shall be locked and the key removed at all times except when under the direct surveillance of a radiographer or a ~~radiographer's assistant~~ radiographer trainee or as may be otherwise authorized pursuant to Section 350.3010.

(Source: Amended 19 Ill. Reg. 8250, effective JUN 12 1995)

## Section 350.1040 Radiation Survey Instruments

- a) The licensee or registrant shall maintain sufficient calibrated and operable radiation survey instruments to make physical radiation surveys as required by this Part and 32 Ill. Adm. Code 340.510(a). Instrumentation required by this Section shall have a range such that 0.516 micro C/kg (2 mR) per hour through 258 micro C/kg (1 R) per hour can be measured.
- b) Each radiation survey instrument shall be calibrated:
  - 1) At energies appropriate for use;
  - 2) At intervals not to exceed 6 months and after each instrument servicing other than battery replacement;
  - 3) Such that accuracy within plus or minus 20 percent can be demonstrated;
  - 4) At two or more widely separated points, other than zero, on each scale, or one point of each scale for digital devices. For instruments without multiple scales, calibration shall be performed at six points equally spaced across the range of 0.516 micro C/kg (2 mR) per hour to 258 micro C/kg (1 R) per hour; and
  - 5) By a person licensed by the Department, the U.S. Nuclear Regulatory Commission, an Agreement State or a Licensing State to perform such service.
- c) Records of calibrations shall be maintained for 5 years after the

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calibration date for inspection by the Department.

- d) Immediately prior to use, a radiation survey instrument shall be checked to ensure that it is operating properly by bringing it near a source of radiation and observing a response. Instruments that fail to respond shall not be used.

(Source: Amended at 19 Ill. Reg. 8250, effective JUN 12 1995)

## SUBPART C: PERSONAL RADIATION SAFETY REQUIREMENTS FOR RADIOGRAPHERS AND RADIOGRAPHERS'-ASSISTANTS RADIOGRAPHER TRAINEES

## Section 350.2010 Training and Testing

- a) The licensee or registrant shall not permit any individual to act as a radiographer, as defined in this Part, until such individual:

1) Has been instructed in the subjects outlined in Section 350-Appendix A. Has been certified by the Department pursuant to 32 Ill. Adm. Code 405.90(a) or (c) for the class of radiography (i.e., radioactive materials, radiation machines, or both) that the licensee or registrant is authorized to perform and such certification has neither expired nor been suspended or revoked by the Department;

2) Has received copies of this Part, 32 Ill. Adm. Code 340 and 400, a copy of the license or certificate of registration issued to the licensee or registrant and copies of and instructions in the licensee's or registrant's operating and emergency procedures;

3) Has been instructed in the use of the licensee's or registrant's sources of radiation, radiographic exposure devices, related handling tools and radiation survey instruments; and

4) Has demonstrated, to the satisfaction of the licensee or registrant, an understanding of the instructions provided pursuant to subsections (a)(2) and (3) above as evidenced by having successfully completed a written test and a field examination.

- b) The licensee or registrant shall not permit any individual to act as a radiographer's assistant radiographer trainee, as defined in this Part, until such individual:

1) Has received copies of and instruction in the licensee's or registrant's operating and emergency procedures. Has been certified by the Department pursuant to 32 Ill. Adm. Code 405.90(b) for the class of radiography (i.e., radioactive materials, radiation machines, or both) that the licensee or registrant is authorized to perform and such certification has neither expired nor been suspended or revoked by the Department; and

2) Has been instructed in the use of and has demonstrated, to the satisfaction of the licensee or registrant, that when the

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individual is under the personal supervision of the radiographer, the individual is competent to use the source of radiation, radiographic exposure devices, related handling tools, and radiation survey instruments that will be used in the position, and has met the requirements of subsections (a)(2) through (a)(4) above.

3) Has demonstrated, to the satisfaction of the licensee or registrant, an understanding of the instructions in subsection (b) by having successfully completed a written or oral test and a field examination on subjects relevant to the position.

- c) Records of the above training, including copies of written tests and dates of oral tests and field examinations, shall be maintained for inspection by the Department for 3 years following termination of employment or until the radioactive material license or certificate of registration is terminated.

d) Each licensee or registrant shall conduct an internal audit program to ensure that the Department's radioactive material license conditions and the licensee's or registrant's operating and emergency procedures are followed by each radiographer and radiographer's assistant radiographer trainee. The licensee or registrant shall audit the job performance of each radiographer and radiographer's assistant radiographer trainee. These performance audits shall be conducted during an actual radiographic operation and shall be conducted at intervals not to exceed 3 months. If it has been more than 3 months since the licensee or registrant audited the performance of a radiographer or radiographer's assistant, the licensee or registrant shall observe and record the performance of the radiographer or radiographer's assistant the next time that individual participates in an industrial radiographic operation. Records of these audits shall be maintained for inspection by the Department for 5 years from the date of the audit. The internal audit program shall:

1) Include observation by the licensee or registrant of the job performance of each radiographer and radiographer trainee during an actual industrial radiographic operation at intervals not to exceed 12 months.

2) Provide that, if a radiographer or a radiographer trainee has not participated in an industrial radiographic operation for more than 6 months since the last audit, the individual's job performance shall be observed and recorded by the licensee or registrant when the individual next participates in an industrial radiographic operation.

- e) Records of these audits shall be maintained for inspection by the Department for 5 years from the date of the audit.

(Source: Amended at 19 Ill. Reg. 8250, effective JUN 12 1995)



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a) The licensee or registrant shall not permit any individual to act as a radiographer or as a ~~radiographer's~~ ~~assistant~~ radiographer trainee unless, at all times during radiographic operations, each such individual wears a direct reading pocket ionization chamber (i.e., pocket dosimeter) and either a film badge or a thermoluminescent dosimeter (TLD). Each film badge or TLD shall be assigned to and worn by only one individual.

b) Pocket ionization chambers (i.e., pocket dosimeters) shall meet the criteria in ANSI N13.5-1972, "Performance Specifications for Direct Reading and Indirect Reading Pocket Dosimeters for X- and Gamma Radiation" published 1972, exclusive of subsequent amendments or editions.

c) The use of pocket ionization chambers (i.e., pocket dosimeters) is subject to the following requirements:

- 1) Pocket ionization chambers shall be recharged at least daily or at least at the start of each work shift;
- 2) Pocket ionization chambers shall be read and exposures recorded at least at the beginning and end of each worker's shift involving the use of a source of radiation;
- 3) Pocket ionization chambers shall be checked for correct response to radiation at periods not to exceed 1 year. Acceptable dosimeters shall read within plus or minus 30 percent of the true radiation exposure. Records of pocket ionization chamber (i.e., pocket dosimeter) calibrations shall be maintained for inspection by the Department for 5 years; and
- 4) If an individual's pocket ionization chamber is discharged beyond its range (i.e., goes "off-scale"), industrial radiographic operations by that individual shall cease immediately and the individual's film badge or TLD shall be sent immediately for processing. The individual shall not use sources of radiation until the individual's radiation dose has been determined.
- d) Reports received from the film badge or TLD processor and records of daily pocket ionization chamber (i.e., pocket dosimeter) readings shall be kept for inspection by the Department until the radioactive material license or certificate of registration is terminated or until the Department authorizes their disposition, in writing, following a determination by the Department that the records contain inaccurate personnel monitoring information.
- e) In addition to other requirements of this Section, each individual performing radiography with sealed sources at a location other than a permanent radiography installation shall wear an alarm ratemeter. Each alarm ratemeter shall:
  - 1) Be checked prior to use at the start of each shift to ensure that the alarm functions properly (sounds);
  - 2) Be set to give an alarm signal at a preset dose rate of 5mSv (500 mrem) per hour or less;
  - 3) Require special means to change the preset alarm function; and
  - 4) Be calibrated, at periods not to exceed 1 year, for correct

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response to radiation. Ratemeters shall alarm within plus or minus 20 percent of the true radiation dose rate. Records of alarm ratemeter calibrations shall be maintained for inspection by the Department for 5 years.

f) The alarm ratemeter shall be used in addition to, and not as a substitute for, the portable survey instrument required by Section 350.3030. The alarm ratemeter is intended to provide additional assurance that the radiation exposure levels are within regulatory limits.

(Source: Amended at 19 Ill. Reg. 8250, effective JUN 12 1995.)

### Section 350.2040 Supervision of Radiographers--Assistants Radiographer Trainees

Except when under the personal supervision of a radiographer, a radiographer's assistant radiographer trainee shall not use radiographic exposure devices, sealed sources, or related source handling tools, or conduct radiation surveys required by Sections 350.3030(b) and 350.3030(c) to determine that the sealed source has returned to the shielded position after an exposure.

(Source: Amended at 19 Ill. Reg. 8250, effective JUN 12 1995.)

### SUBPART D: PRECAUTIONARY PROCEDURES IN RADIOGRAPHIC OPERATIONS

#### Section 350.3010 Access Control and Security

a) During each radiographic operation, the radiographer or radiographer's assistant radiographer trainee shall maintain a direct surveillance of the operation to protect against unauthorized entry into a high radiation area, as defined in 32 Ill. Adm. Code 310, except:

- 1) Where the high radiation area is equipped with a control device or alarm system as described in 32 Ill. Adm. Code 340.610(a), or
  - 2) Where the high radiation area is locked to protect against unauthorized or accidental entry.
- b) Sources of radiation shall not be left unattended except when secured against unauthorized use, access or removal.

(Source: Amended at 19 Ill. Reg. 8250, effective JUN 12 1995.)

#### Section 350.3045 Operating Requirements

a) When radiography is performed at a location other than a permanent radiographic installation, a minimum of two radiographic personnel shall be present to operate the radiographic exposure device. At least one of the radiographic personnel shall be a radiographer. The

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other radiographic personnel may be either a radiographer or radiographer's assistant radiographer trainee.

- b) Collimators shall be used in industrial radiographic systems that use crank-out devices except when physically impossible.
- c) Other than a radiographer, or a radiographer's assistant radiographer trainee who is under the personal supervision of a radiographer, no person shall manipulate controls or operate equipment used in industrial radiographic operations.
- d) At each job site, the following shall be supplied by the licensee or registrant:
  - 1) The appropriate barrier ropes and signs;
  - 2) At least one operable, calibrated survey instrument;
  - 3) A current whole body individual monitoring device (TLD or film badge) for each worker;
  - 4) An operable, calibrated pocket ionization chamber (i.e., pocket dosimeter) with a range of zero to 51.6 micro C/kg (200 mR) for each worker; and
  - 5) An operable, calibrated, alarm ratemeter for each worker who performs industrial radiography with a sealed source.
- e) Industrial radiographic operations shall not be performed if any of the items in subsection (d) above are not available at the job site or are inoperable.

(Source: Amended at 19 Ill. Reg. 8250, effective

JUN 12 1995)

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Section 350.APPENDIX A Subjects to be Covered During the Instruction of Radiographers (Repealed)

- i) Fundamentals-of-Radiation-Safety
  - A) Characteristics-of-radiation
  - B) Units-of-radiation-dose-and-quantity-of-radioactivity
  - C) Significance-of-radiation-dose
    - i) Radiation-protection-standards
    - ii) Biological-effects-of-radiation
  - B) Levels-of-radiation-from-sources-of-radiation
  - B) Methods-of-controlling-radiation-dose
    - i) Working-time
    - ii) Working-distances
    - iii) Shielding
  - iii) Radiation-Detection-Instrumentation-to-be-Used
    - A) Use-of-radiation-survey-instruments
      - i) Operation
      - ii) Calibration
      - iii) Limitations
    - B) Survey-techniques
    - C) Use-of-personnel-monitoring-equipment
      - i) Film-badges
      - ii) Thermoluminescent-dosimeters
      - iii) Pocket-dosimeters
    - iii) Radiographic-Equipment-to-be-Used
      - A) Remote-handling-equipment
      - B) Radiographic-exposure-devices-and-sealed-sources-including pictures-or-models-of-source-assemblies-(i.e.-pigtail)
        - i) Storage-containers-transport-containers-and-source-changers
        - ii) Operation-and-control-of-x-ray-equipment
      - B) Collimators
    - iv) The-Requirements-of-Pertinent-Federal-and-State-Regulations
    - v) The-Licensee's-or-Registrant's-Written-Operating-and-Emergency Procedures
    - vi) Case-Histories-of-Radiography-Accidents

(Source: Repealed at 19 Ill. Reg. 8250, effective

JUN 12 1995)



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1) Heading of the Part: Standards for Protection Against Radiation2) Code Citation: 32 Ill. Adm. Code 3403) Section Number: Adopted Action:

340.260 Amendment  
 340.310 Amendment  
 340.410 Amendment  
 340.510 Amendment  
 340.930 Amendment  
 340.960 Amendment  
 340.1130 Amendment  
 340.1220 Amendment  
 340.1230 Amendment

4) Statutory Authority: Implementing and authorized by Section 16 of the Radiation Protection Act of 1990 (420 ILCS 40/16).5) Effective Date of Amendments: June 12, 19956) Does this rulemaking contain an automatic repeal date? No7) Do these amendments contain incorporations by reference? Yes, the amendment contains material incorporated by reference pursuant to Section 100/5-75(a) of the Administrative Procedure Act [5 ILCS 100/5-75(a)].8) Date filed in Agency's Principal Office: June 9, 19959) Notice of Proposal Published in the Illinois Register:

July 15, 1994 (18 Ill. Reg. 11002)

10) Has JCAR issued a Statement of Objections to these Amendments? No11) Differences between proposal and final version:

a) In the Table of Contents, by deleting the phrase "Checks" after the word "Surveys".

b) By changing "18" to "19" in all source notes.

c) By inserting the subpart heading "SUBPART C: OCCUPATIONAL DOSE LIMITS" immediately after the main source note.

d) By inserting the subpart heading "SUBPART D: RADIATION DOSE LIMITS FOR INDIVIDUAL MEMBERS OF THE PUBLIC" before "Section 340.310".

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e) By inserting the subpart heading "SUBPART E: TESTING FOR LEAKAGE OR CONTAMINATION OF SEALED SOURCES" before "Section 340.410".

f) By inserting the subpart heading "SUBPART F: SURVEYS AND MONITORING" before "Section 340.510".

g) In Section 340.510(b), on line 7, by adding after the period, the following: "To satisfy this requirement, the licensee shall."

h) In Section 340.510(b), by rewriting subsections (1) and (2) as follows:

"1) Post a legible note on the instrument showing the date of calibration; and

2) Ensure that instrument calibrations are performed by persons specifically licensed by the Department, the U.S. Nuclear Regulatory Commission, an Agreement State or a Licensing State to perform such calibrations."

i) In Section 340.510, by rewriting subsection (c) as follows:

"c) On each day of use, prior to using an instrument to perform required monitoring, the licensee or registrant shall verify that the instrument is operational. Operational checks for radiation measurement or radiation detection instruments shall include verification of response to a source of radiation."

j) By inserting the subpart heading "SUBPART J: PRECAUTIONARY PROCEDURES" before "Section 340.930".

k) In Section 340.930(f), on line 5, by moving the " " after the word "AREA" outside the quotation mark.

l) By inserting the subpart heading "SUBPART L: RECORDS" before "Section 340.1130".

m) In the Section header, by deleting the phrase "Checks".

n) In Section 340.1130(a), on line 2, by deleting the phrase "checks".

o) In Section 340.1130(a)(1)(A), on line 2, by deleting the phrase "manufacturer".

p) In Section 340.1130(a), by rewriting subsection (2) as follows:

"2) For each survey instrument calibrated in accordance with subsection 340.510(b), the licensee shall maintain the following

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records:

- A) A copy of the licensee's own calibration procedures or a copy of a license issued by the Department, the U.S. Nuclear Regulatory Commission, an Agreement State, or a Licensing State authorizing the person that performed the calibrations to perform calibrations as a customer service; and
- B) A record identifying the manufacturer, model and serial number of the instrument that was calibrated, the calibration results, the identity of the individual who performed the calibration and the date of the calibration."
- q) In Section 340.1130(a), by rewriting subsection (3) as follows:
- "3) Each licensee authorized to perform instrument calibrations shall maintain a copy of each calibration document created in accordance with subsection (a)(2)(B) above and a copy of the procedures followed to perform that calibration."
- r) By inserting the subpart heading "SUBPART M: REPORTS AND NOTIFICATIONS" before "Section 340.1220".
- s) In Section 340.1220(a), on line 4, by deleting the phrase "exposures to radiation or" immediately after the word "avoid".
- t) In Section 340.1220(a), on line 5, by inserting the phrase "or doses" immediately after the word "material".
- u) In Section 340.1220(c), on line 1, by changing the phrase "Twenty-four Hour Notification" to the phrase "Additional Twenty-four Hour Notifications for Licensees".
- v) In Section 340.1220(c)(1)(A), on line 3, by adding the following "in addition to those established by the licensee prior to the event" immediately after the word "controls".
- w) In Section 340.1220(c)(1)(C), on line 1, by deleting the word "Has" and adding the phrase "Results in" and by adding the word "being" immediately after the word "area" and on line 2, by adding the following "either comply with operating procedures established by the licensee, or to" immediately after the word "to".
- x) In Section 340.1220(c)(2)(A), on line 2, by adding the phrase "or doses" immediately after the word "releases".
- 12) Have all the changes agreed upon by the agency and JCAR been made as

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indicated in the agreement letter issued by JCAR? The Joint Committee on Administrative Rules did not issue an agreement letter for this Part.

- 13) Will these amendments replace an emergency amendment currently in effect? No

- 14) Are there any amendments pending on this Part? No

- 15) Summary and Purpose of Amendments: This amendment will: (a) delete the Agency Note describing an example of a planned special exposure; (b) modify requirements for licensees to require all facilities to meet the new dose to members of the public limit; (c) clarify that leak tests must confirm that sealed sources are not leaking and must be received prior to using these sources; (d) specify the information to be evaluated and recorded when instruments are calibrated; (e) require licensees to check instruments being used to meet the requirements of this Part; (f) clarify when licensees and registrants will be authorized to use direct and indirect reading pocket ionization chambers; (g) provide an exemption to facilities treating patients by allowing the removal of the term "grave" from the required posting; (h) update references to more recent versions of transportation regulations to match changes in 32 Ill. Adm. Code 341; (j) specify information to be maintained in survey and calibration records; (k) add notification requirements for events involving radioactive material; (l) clarify the information to be reported to the Department when an incident occurs; and (m) delete the provision requiring licensees or registrants to maintain records of instrument response checks.

- 16) Information and questions regarding these amendments shall be directed to:

Valerie Puccini  
Staff Attorney /  
Department of Nuclear Safety  
1035 Outer Park Drive  
Springfield, Illinois 62704  
(217) 785-9880 (voice)  
(217) 782-6133 (TDD)

The full text of the Adopted Amendments begins on the next page:



## DEPARTMENT OF NUCLEAR SAFETY

## NOTICE OF ADOPTED AMENDMENT

## TITLE 32: ENERGY

CHAPTER II: DEPARTMENT OF NUCLEAR SAFETY  
SUBCHAPTER b: RADIATION PROTECTION

## PART 340

## STANDARDS FOR PROTECTION AGAINST RADIATION

## SUBPART A: GENERAL PROVISIONS

## Section

340.10 Purpose

340.20 Scope

340.25 Incorporations by Reference

340.30 Definitions

340.40 Implementation

## SUBPART B: RADIATION PROTECTION PROGRAMS

## Section

340.110 Radiation Protection Programs

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AUTHORITY: Implementing and authorized by Section 16 of the Radiation Protection Act of 1990 [420 ILCS 40/16].

SOURCE: Filed April 24, 1970 by the Department of Public Health; transferred to the Department of Nuclear Safety by P.A. 81-1516, effective December 3, 1980; amended at 5 Ill. Reg. 9586, effective September 10, 1981; codified at 7 Ill. Reg. 16027; Recodified at 10 Ill. Reg. 11273; amended at 10 Ill. Reg. 17538, effective September 25, 1986; amended at 16 Ill. Reg. 11538, effective July 7, 1992; old Part repealed, new Part adopted at 17 Ill. Reg. 18507, effective January 1, 1994; amended at 19 Ill. Reg. 8264, effective

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SUBPART C: OCCUPATIONAL DOSE LIMITS

Section 340.260 Planned Special Exposures

A licensee may authorize an adult worker to receive doses in addition to, and accounted for separately from, the doses received under the limits specified in Section 340.210 provided that each of the following conditions are satisfied:

a) The licensee authorizes a planned special exposure only in an exceptional situation when alternatives that might avoid the higher exposure are unavailable or impractical.

~~AGENCY-NOTES:--An-example-of-an-exceptional-situation-is-the-retrieval of-an-industrial-radiography-source-from-an-area-that-cannot-be evacuated;~~

b) The management official of the licensee and employer, if the employer is not the licensee, specifically authorize the planned special exposure, in writing, before the exposure occurs.

c) Before a planned special exposure, the licensee ensures that each individual involved is:

1) Informed of the purpose of the planned operation; and

2) Informed of the estimated doses and associated potential risks and specific radiation levels or other conditions that might be involved in performing the task; and

3) Instructed in the measures to be taken to keep the dose ALARA considering other risks that may be present.

d) Prior to permitting an individual to participate in a planned special exposure, the licensee ascertains previous doses received during the lifetime of the individual as required by Section 340.250(b).

e) Subject to Section 340.210(b), the licensee shall not authorize a planned special exposure that would cause an individual's dose from all planned special exposures and all doses in excess of the limits to exceed:

1) The numerical values of any of the dose limits in Section 340.210(a) in any year; and

2) Five times the annual dose limits in Section 340.210(a) during the individual's lifetime.

f) The licensee maintains records of the conduct of a planned special exposure in accordance with Section 340.1150 and submits a written report in accordance with Section 340.1240.

g) The licensee records the best estimate of the dose resulting from the planned special exposure in the individual's record and informs the individual, in writing, of the dose within 30 days from the date of the planned special exposure. The dose from planned special exposure need not be considered in controlling future occupational dose of the individual pursuant to Section 340.210(a) but shall be included in evaluations required by subsections (d) and (e) above.



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(Source: Amended at 19 Ill. Reg. 8264, effective JUN 12 1995)

## SUBPART D: RADIATION DOSE LIMITS FOR INDIVIDUAL MEMBERS OF THE PUBLIC

## Section 340.310 Dose Limits for Individual Members of the Public

- a) Each licensee or registrant shall conduct operations so that:
- 1) The dose in any unrestricted area from external sources does not exceed 0.02 mSv (0.002 rem) in any one hour; and
  - 2) The total effective dose equivalent to individual members of the public from a radiation machine the-licensed-or-registered operation, exclusive-of-the-dose-contribution-from-the-licensee's disposal-of--radioactive-material--into--sanitary--sewerage--in accordance-with-Section-340.1030, does not exceed:
    - A) 5 mSv (0.5 rem) in any year at any locations where sources-of a radiation were facilities a facility where sources-of a radiation were machine was installed before January 1, 1994, and the use of the source-of radiation machine does not change on or after January 1, 1994; or
    - B) 1 mSv (0.1 rem) in any year at locations any location within facilities a facility where sources-of a radiation are machine is installed or where the source-of radiation machine or its use changes on or after January 1, 1994.
- AGENCY NOTE: It is the Department's intent to allow registrants using radiation machines in facilities designed to the 5 mSv (0.5 rem) limit to continue to use the 5 mSv (0.5 rem) total effective dose equivalent limit for a member of the public. This includes locations where the intensity of a source-of the radiation machine is not increased beyond the design basis, the type of radiation machine use is not changed, and the type of facility use is not changed.
- 3) The total effective dose equivalent to individual members of the public from a licensed operation, exclusive of the dose contribution from a licensee's disposal of radioactive material into sanitary sewerage in accordance with Section 340.1030, does not exceed 1 mSv (0.1 rem) in any year.
  - b) A registrant, a licensee or an applicant-for-a-license may apply for prior Department authorization to operate up to an annual dose limit for an individual member of the public of 5 mSv (0.5 rem). This application shall include the following information:
    - 1) Demonstrations of the need for and the expected duration of operations in excess of the limit in subsection (a)(2)(B)(3) above;
    - 2) The licensee's or registrant's program to assess and control dose within the 5 mSv (0.5 rem) annual limit; and
    - 3) The procedures to be followed to maintain the dose ALARA.
  - c) Prior to allowing a member of the public to enter a restricted area,

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the licensee or registrant shall give instructions on radiation hazards and protective measures to that individual.

(Source: Amended at 19 Ill. Reg. 8264, effective JUN 12 1995)

## SUBPART E: TESTING FOR LEAKAGE OR CONTAMINATION OF SEALED SOURCES

## Section 340.410 Testing for Leakage or Contamination of Sealed Sources

- a) The licensee in possession of any sealed source shall assure that:
- 1) Each sealed source, except as specified in subsection (b) below, is tested for leakage or contamination and the test results that confirm that the sealed source is not leaking or contaminated are received before the sealed source is put into use, unless the licensee has a certificate from the transferor indicating that the sealed source was tested within 6 months for beta and gamma emitting sources, or within 3 months for sources designed to emit alpha particles, before transfer to the licensee.
  - 2) Each sealed source that is not designed to emit alpha particles is tested for leakage or contamination at intervals not to exceed 6 months or at alternative intervals approved by the Department, pursuant to 32 Ill. Adm. Code 330.280(m), the U.S. Nuclear Regulatory Commission, an Agreement State or a Licensing State or-the-U.S.-Nuclear-Regulatory-Commission.
  - 3) Each sealed source that is designed to emit alpha particles is tested for leakage or contamination at intervals not to exceed 3 months or at alternative intervals approved by the Department, pursuant to 32 Ill. Adm. Code 330.280(m), the U.S. Nuclear Regulatory Commission, an Agreement State or a Licensing State or-the-Nuclear-Regulatory-Commission.
  - 4) For each Each sealed source that is required to be tested for leakage or contamination shall be removed from service if at-any other--time there is reason to suspect that the sealed source might may have been damaged or might may be leaking or contaminated. The source shall be kept out of service until test results that confirm there is not-the-licensee-shall-assure--that the--sealed--source--is--tested--for leakage or contamination are received before--further--use.
  - 5) Tests for leakage for all sealed sources, except brachytherapy sources manufactured to contain radium, shall be capable of detecting the presence of 185 Bq (0.005 uCi) of radioactive material on a test sample. Test samples shall be taken from the sealed source or from the surfaces of the container in which the sealed source is stored or mounted on which one might expect contamination to accumulate. For a sealed source contained in a device, test samples are shall be obtained when the source is in the "off" position. If setting the source to the "off" position

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would disrupt the licensee's activities, test samples may be obtained while the source is in the "on" position, provided that the dose likely to be received by the individual while obtaining the samples will not be so great as to require monitoring pursuant to Section 340.520(a).

- 6) The test for leakage for brachytherapy sources manufactured to contain radium shall be capable of detecting an absolute leakage rate of 37 Bq (0.001 uCi) of radon-222 in a 24 hour period when the collection efficiency for radon-222 and its daughters has been determined with respect to collection method, volume and time.

- 7) Tests for contamination from radium daughters shall be taken on the interior surface of brachytherapy source storage containers and shall be capable of detecting the presence of 185 Bq (0.005 uCi) of a radium daughter which has a half-life greater than 4 days.

- b) A licensee need not perform tests for leakage or contamination on the following sealed sources:

- 1) Sealed sources containing only radioactive material with a half-life of less than 30 days;
- 2) Sealed sources containing only radioactive material as a gas;
- 3) Sealed sources containing 3.7 MBq (100 uCi) or less of beta or photon emitting material or 370 kBq (10 uCi) or less of alpha emitting material;
- 4) Sealed sources containing only hydrogen-3;
- 5) Seeds of iridium-192 encased in nylon ribbon;
- 6) Sealed sources, except teletherapy and brachytherapy sources, which that are stored, not being used and identified as in storage. The licensee shall, however, test each such sealed source for leakage or contamination and receive the test results that confirm that the sealed source is not leaking or contaminated before any use or transfer unless it has been tested for leakage or contamination within 6 months for beta and gamma emitting sources, or within 3 months for sources designed to emit alpha particles, before the date of use or transfer; and
- 7) Sealed sources distributed under a license issued pursuant to 32 Ill. Adm. Code 330.280(m), but only if the evaluation sheet for those sealed sources, as filed in the "Radioactive Material Reference Manual" maintained by the Department of Health and Human Services or in the "Registry of Radioactive Sealed Sources and Devices" maintained by the U.S. Nuclear Regulatory Commission, specifies that testing for leakage or contamination is not required.

- c) Tests for leakage or contamination from sealed sources shall be performed by persons specifically authorized by the Department, an Agreement State, a Licensing State or the Nuclear Regulatory Commission to perform such services.

- d) Test results shall be kept as specified in Section 340.1135 in-units

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~~of-bequerels-or--microcurie--and--maintained--for--inspection--by--the Department.~~

- e) The following shall be considered evidence that a sealed source is leaking:

- 1) The presence of 185 Bq (0.005 uCi) or more of removable contamination on any test sample.
- 2) Leakage of 37 Bq (0.001 uCi) of radon-222 per 24 hours for brachytherapy sources manufactured to contain radium.
- 3) The presence of removable contamination resulting from the decay of 185 Bq (0.005 uCi) or more of radium.
- f) The licensee shall immediately withdraw a leaking or contaminated sealed source from use and shall take action to prevent the spread of contamination. The leaking or contaminated sealed source shall be repaired, decontaminated or disposed of in accordance with this Part.
- g) Reports of test results for leaking or contaminated sealed sources shall be made pursuant to Section 340.1260.

(Source: Amended at 19 Ill. Reg. 8264, effective JUN 12 1995)

## SUBPART F: SURVEYS AND MONITORING

## Section 340.510 General

- a) Each licensee or registrant shall make, or cause to be made, surveys:
- 1) That demonstrate compliance with this Part; and
  - 2) That evaluate:
    - A) The extent of radiation levels;
    - B) Concentrations or quantities of radioactive material; and
    - C) The potential radiological hazards that could be present.
- b) The licensee or registrant shall ensure that instruments and equipment used for quantitative radiation measurements (e.g., dose rate and effluent monitoring) are calibrated at intervals not to exceed 12 months for the radiation measured or at alternative intervals specified in regulations of the Department, the U.S. Nuclear Regulatory Commission, an Agreement State or a Licensing State or the Nuclear Regulatory Commission. To satisfy this requirement, the licensee shall:
- 1) Post a legible note on the instrument showing the date of calibration; and
  - 2) Ensure that instrument calibrations are performed by persons specifically licensed by the Department, the U.S. Nuclear Regulatory Commission, an Agreement State or a Licensing State to perform such calibrations.
- c) On each day of use, prior to using an instrument to perform required monitoring, the licensee or registrant shall verify that the instrument is operational. Operational checks for radiation measurement or radiation detection instruments shall include



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verification of response to a source of radiation.

ed) Personnel--dosimeters--except Except for direct-and-indirect-reading pocket-ionization-chambers and those dosimeters used to measure the dose to any extremity, personnel dosimeters that require processing to determine the radiation dose and that are used by licensees or registrants to comply with Section 340.210, with other applicable provisions of 32 Ill. Adm. Code: Chapter II, Subchapters b and d, or with conditions specified in a license shall be processed and evaluated by a qualified dosimetry processor. A dosimetry processor is qualified if:

- 1) It holds current personnel dosimetry accreditation from the National Voluntary Laboratory Accreditation Program (NVLAP) of the National Institute of Standards and Technology; and
- 2) It is approved by NVLAP for the type of radiation or radiations that most closely approximate the type of radiation or radiations for which the individual wearing the dosimeter is monitored.

e) A licensee or registrant shall obtain Department approval prior to using pocket ionization chambers or electronic dosimeters to determine radiation dose, to comply with Section 340.210, or with other applicable provisions of 32 Ill. Adm. Code: Chapter II, Subchapters b and d or with conditions specified in a license. The Department will grant approval provided the licensee or registrant submits information describing the type and range of the dosimeters and describes a program to ensure the accuracy, reliability, precision and security of the dosimetry data.

df) The licensee or registrant shall ensure that adequate precautions are taken to prevent deceptive exposure of an individual monitoring device.

(Source: amended at 19 Ill. Reg. 8264, effective JUN 12 1995)

## SUBPART J: PRECAUTIONARY PROCEDURES

## Section 340.930 Exceptions to Posting Requirements

a) A licensee or registrant is not required to post caution signs in areas or rooms containing sources of radiation for periods of less than 8 hours, if each of the following conditions is met:

- 1) The sources of radiation are constantly attended during these periods by an individual who takes the precautions necessary to prevent the exposure of individuals to sources of radiation in excess of the limits established in this Part; and
- 2) The area or room is subject to the licensee's or registrant's control.

b) Rooms or other areas in hospitals that are occupied by patients are not required to be posted with caution signs pursuant to Section 340.920 provided that the patient door posting requirements of 32 Ill.

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Adm. Code 335.5030(a)(45) or 335.7030(b) are met.

c) Rooms or other areas in hospitals that are occupied by patients are not required to be posted with caution signs, provided that:

- 1) A patient being treated with a permanent implant could be released from confinement pursuant to 32 Ill. Adm. Code 335.2110; or
- 2) A patient being treated with a therapeutic radiopharmaceutical could be released from confinement pursuant to 32 Ill. Adm. Code 335.5030(b).

d) A room or area is not required to be posted with a caution sign because of the presence of a sealed source provided the radiation level at 30 centimeters (12 inches) from the surface of the sealed source container or housing does not exceed 0.05 mSv (0.005 rem) per hour.

e) A room or area is not required to be posted with a caution sign because of the presence of radiation machines used solely for diagnosis in the healing arts.

f) If a room or area in which radioactive material or radiation machines are used for the treatment of patients is required to be posted with the words, "GRAVE DANGER, VERY HIGH RADIATION AREA" in accordance with 340.920(c), the following words may be substituted: "DANGER, VERY HIGH RADIATION AREA".

(Source: Amended at 19 Ill. Reg. 8264, effective JUN 12 1995)

## Section 340.960 Procedures for Receiving and Opening Packages

a) Each licensee who is authorized to receive a package containing quantities of radioactive material in excess of a Type A quantity, as defined in 32 Ill. Adm. Code 341.20, as listed in 49 CFR 173.435 revised-as-of-September-29-1988 published October 1, 1993, or as derived from 49 CFR 173.433 revised-as-of-March-19-1985 published October 1, 1993 shall:

- 1) Make arrangements to receive the package when the carrier offers it for delivery; or
- 2) Make arrangements to receive the notification of the arrival of the package at the carrier's terminal and to take possession of the package expeditiously.

b) Each licensee shall:

- 1) Monitor the external surfaces of a labeled package for radioactive contamination unless the package contains only radioactive material in the form of a gas or in special form radioactive material as defined in 32 Ill. Adm. Code 310.20;

AGENCY NOTE: Labeled means labeled with a Radioactive White I, Radioactive Yellow II or Radioactive Yellow III label as specified in U.S. Department of Transportation regulations, 49 CFR 172.403 and 172.436-440, current-as-of--October-17-1991

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published October 1, 1993 ~~re-exclusive-of-subsequent-amendments-or-editions.~~

2) Monitor the external surfaces of a labeled package for radiation levels unless the package contains quantities of radioactive material that are less than or equal to the Type A quantity, as defined in 32 Ill. Adm. Code 341.20, as listed in 49 CFR 173.435 ~~revised-as-of-September-29-1998~~ published October 1, 1993, or as derived from 49 CFR 173.433 ~~revised-as-of-March-19-1985~~ published October 1, 1993; and

3) Monitor all packages known to contain radioactive material for radioactive contamination and radiation levels if there is evidence of degradation of package integrity, such as packages that are crushed, wet or damaged.

c) The licensee shall perform the monitoring required by subsection (b) above as soon as practicable after receipt of the package, but not later than 3 hours after the package is received at the licensee's facility if it is received during the licensee's normal working hours or if there is evidence of degradation of package integrity, such as a package that is crushed, wet or damaged. If a package is received after working hours, and has no evidence of degradation of package integrity, the package shall be monitored no later than 3 hours from the beginning of the next working day.

d) The licensee shall immediately notify the final delivery carrier and the Department by telephone ~~and--either--telegram--or--facsimile,~~ and shall confirm the initial contact within 24 hours by overnight letter or telefacsimile to the Department, when:

- 1) Removable radioactive surface contamination exceeds the limits of 32 Ill. Adm. Code 341.150(b); or
- 2) External radiation levels exceed the limits of 32 Ill. Adm. Code 341.150(i) and (j).

e) Each licensee shall:

- 1) Establish, maintain and retain written procedures for safely opening packages in which radioactive material is received; and
- 2) Ensure that the procedures are followed and that special instructions for the type of package being opened are adhered to.

(Source: ~~repealed~~ at 19 Ill. Reg. 8264, effective JUN 12 1995)

SUBPART L: RECORDS

## Section 340.1130 Records of Surveys and Calibrations

a) Each licensee or registrant shall maintain records showing the results of surveys and calibrations required by Sections 340.510 and 340.960(b). The licensee or registrant shall retain these records for 5 years after the record is made.

1) Records of surveys shall include:

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- A) The location and date of the survey and the model and serial number of the instrument used to perform the survey;
- B) The identity of the individual performing the survey; and
- C) The results of the survey and any corrective actions that were taken as a result.

2) For each survey instrument calibrated in accordance with subsection 340.510(b), the licensee shall maintain the following records:

A) A copy of the licensee's own calibration procedures or a copy of a license issued by the Department, the U.S. Nuclear Regulatory Commission, an Agreement State or a Licensing State authorizing the person that performed the calibrations to perform calibrations as a customer service; and

B) A record identifying the manufacturer, model and serial number of the instrument that was calibrated, the calibration results, the identity of the individual who performed the calibration and the date of the calibrations.

3) Each licensee authorized to perform instrument calibrations shall maintain a copy of each calibration document created in accordance with subsection (a)(2)(B) above and a copy of the procedures followed to perform that calibration.

b) The licensee or registrant shall retain each of the following records until the Department terminates each license or registration for which the record is required:

- 1) Records of the results of surveys to determine the dose from external sources of radiation that are used, in the absence of or in combination with individual monitoring data, in the assessment of individual dose equivalents;
- 2) Records of the results of measurements and calculations that are used to determine individual intakes of radioactive material and that are used in the assessment of internal dose;
- 3) Records showing the results of air sampling, surveys and bioassays required pursuant to Sections 340.730(a)(3)(A) and (B); and
- 4) Records of the results of measurements and calculations used to evaluate the release of radioactive effluents to the environment.

(Source: Amended at 19 Ill. Reg. 8264, effective JUN 12 1995)

SUBPART M: REPORTS AND NOTIFICATIONS

## Section 340.1220 Notification of Incidents

a) Immediate Notification. Notwithstanding any other requirements for notification, each licensee or registrant shall immediately report to the Department discovery of an event that prevents immediate protective actions necessary to avoid releases of radioactive material



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or doses in excess of the regulatory limits, or each event involving a source of radiation possessed by the licensee or registrant that may have caused or threatens to cause any of the following conditions:

- 1) An individual to receive:
  - A) A total effective dose equivalent of 0.25 Sv (25 rem) or more; or
  - B) An eye dose equivalent of 0.75 Sv (75 rem) or more; or
  - C) A shallow dose equivalent to the skin or extremities or a total organ dose equivalent of 2.5 Gy (250 rad) or more; or
- 2) The release of radioactive material, inside or outside of a restricted area, so that, had an individual been present for 24 hours, the individual could have received an intake five times the ALI, except the provisions of this subsection do not apply to locations where personnel are not normally stationed during routine operations, such as hot cells or process enclosures.
- b) Twenty-four Hour Notification. Each licensee or registrant shall, within 24 hours of discovery of the event, report to the Department each event involving loss of control of a licensed or registered source of radiation possessed by the licensee or registrant that may have caused, or threatens to cause, any of the following conditions:
  - 1) An individual to receive, in a period of 24 hours:
    - A) A total effective dose equivalent exceeding 0.05 Sv (5 rem); or
    - B) An eye dose equivalent exceeding 0.15 Sv (15 rem); or
    - C) A shallow dose equivalent to the skin or extremities or a total organ dose equivalent exceeding 0.5 Sv (50 rem); or
  - 2) The release of radioactive material, inside or outside of a restricted area, so that, had an individual been present for 24 hours, the individual could have received an intake in excess of one occupational ALI, except the provisions of this subsection do not apply to locations where personnel are not normally stationed during routine operations, such as hot cells or process enclosures.
- c) Additional Twenty-four Hour Notifications for Licensees. Each licensee shall notify the Department within 24 hours after the discovery of any of the following events involving radioactive material:
  - 1) An unplanned contamination event that:
    - A) Requires access to the contaminated area by workers or the public to be restricted for more than 24 hours by imposing radiological controls in addition to those established by the licensee prior to the event or by prohibiting entry into the area;
    - B) Involves a quantity of material greater than five times the lowest annual limit on intake specified in 10 CFR 20, Appendix B, effective January 1, 1994, for the material; and
    - C) Results in access to the area being restricted for a reason other than to either comply with operating procedures

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established by the licensee, or to allow radionuclides with a half-life of less than 24 hours to decay prior to decontamination.

- 2) An event in which equipment is disabled or fails to function as designated when:
  - A) The equipment is required by regulation or license condition to prevent releases or doses exceeding regulatory limits, or to mitigate the consequences of an accident;
  - B) The equipment is required to be available and operable when it is disabled or fails to function; and
  - C) No redundant equipment is available and operable to perform the required safety function.
- 3) An event that requires unplanned medical treatment at a medical facility of an individual with radioactive contamination on the individual's clothing or body.
- 4) An unplanned fire or explosion damaging any licensed material or any device, container or equipment containing licensed material when:
  - A) The quantity of material involved is greater than five times the lowest annual limit on intake specified in 10 CFR 20, Appendix B, effective January 1, 1994, for the material; and
  - B) The damage affects the integrity of the licensed material or its container.
- ed) Licensees or registrants shall make the reports required by subsections (a), (b) and (c) above by initial contact by telephone to the Department and shall confirm the initial contact within 24 hours by ~~telegram~~ overnight letter or facsimile telefacsimile to the Department.
- de) The licensee or registrant shall prepare each written report filed with the Department pursuant to this Section so that names of individuals who have received exposure to sources of radiation are stated in a separate and detachable portion of the report.
- ef) The provisions of this Section do not apply to doses that result from planned special exposures, provided such doses are within the limits for planned special exposures and are reported pursuant to Section 340.1240.

(Source: Amended at 19 Ill. Reg. 8264, effective JUN 12 1995)

### Section 340.1230 Reports of Exposures, Radiation Levels and Concentrations of Radioactive Material Exceeding the Limits

- a) Reportable Events. In addition to the notification required by Section 340.1220, each licensee or registrant shall submit a written report to the Department within 30 days after learning of any of the following occurrences:
  - 1) Incidents for which notification is required by Section 340.1220;

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- or
- 2) Doses in excess of any of the following:
- A) The occupational dose limits for adults in Section 340.210; or
- B) The occupational dose limits for a minor in Section 340.270; or
- C) The limits for an embryo/fetus of a declared pregnant woman in Section 340.280; or
- D) The limits for an individual member of the public in Section 340.310; or
- E) Any applicable limit in the license; or
- 3) Levels of radiation or concentrations of radioactive material in:
- A) A restricted area in excess of any applicable limit in the license; or
- B) An unrestricted area in excess of ten times any applicable limit set forth in this Part or ten times any applicable limit set forth in the license, whether or not involving exposure of any individual in excess of the limits in Section 340.310; or
- 4) For licensees subject to the provisions of the U.S. Environmental Protection Agency's generally applicable environmental radiation standards in 40 CFR 190, effective July 1, 1990 1993, levels of radiation or releases of radioactive material in excess of those standards, or of license conditions related to those standards.
- b) Contents of Reports
- 1) Each report required by subsection (a) above shall include a description of the event, including the date, time and location of the event, the manufacturer and model number of any equipment that failed or malfunctioned and the identity, quantities and chemical forms of any radionuclides involved. Each report shall also describe the extent of exposure of individuals to radiation and radioactive material, including, as appropriate:
- A) Estimates of each individual's dose;
- B) The levels of radiation and concentrations of radioactive material involved;
- C) The cause of the elevated exposures, dose rates or concentrations; and
- D) Corrective steps taken or planned to ensure against a recurrence, including the schedule for achieving conformance with applicable limits, generally applicable environmental standards and associated license conditions.
- 2) Each report filed pursuant to subsection (a) above shall include for each individual exposed: the name, Social Security account number and date of birth. With respect to the limit for the embryo/fetus in Section 340.280, the identifiers shall be those of the declared pregnant woman. The report shall be prepared so that this information is stated in a separate and detachable portion of the report.

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## NOTICE OF ADOPTED AMENDMENT

(Source: Amended at 19 Ill. Reg. 8264, effective  
JUN 12 1995)



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## NOTICE OF ADOPTED AMENDMENT

1) Heading of the Part: Use Of X-Rays in the Healing Arts Including Medical, Dental, Podiatry, and Veterinary Medicine

2) Code Citation: 32 Ill. Adm. Code 360

3) Section Number: 360.120  
Adopted Action: Amendment

4) Statutory Authority: Implementing and authorized by the Radiation Protection Act of 1990 [420 ILCS 40].

5) Effective Date of Rules: June 12, 1995

6) Does this rulemaking contain an automatic repeal date? No

7) Does this amendment contain incorporations by reference? Yes, the amendment contains material incorporated by reference pursuant to Section 100/5-75(a) of the Administrative Procedure Act [5 ILCS 100/5-75(a)].

8) Date filed in Agency's Principal Office: June 9, 1995

9) Notice of Proposal Published in the Illinois Register:  
January 13, 1995 (19 Ill. Reg. 163)

10) Has JCAR issued a Statement of Objections to these Rules? No

11) Differences between proposal and final version:

a) To correct the Main Source Note for the emergency action to "emergency amendment at 19 Ill. Reg. 273, effective December 30, 1994, for a maximum of 150 days".

b) In Section 360.120(d)(2), on line 5, by correcting "subsection (A) or (B)" to "subsection (2)(A) or (B)".

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes

13) Will these rules replace an emergency rule currently in effect? Yes

14) Are there any amendments pending on this Part? No

15) Summary and Purpose of Amendments: This Amendment will allow the use of accelerator systems that only have one beam monitor instead of two as required by Section 360.120(b)(5)(C). The machines in question can still serve a useful purpose due to their proven history of reliability and can continue to provide quality care at a reasonable cost. The current rule

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inadvertently restricts the use of these machines and this amendment will allow the use of these machines in the treatment of cancer patients.

16) Information and questions regarding these amendments shall be directed to:

Valerie Puccini  
Staff Attorney  
Department of Nuclear Safety  
1035 Outer Park Drive  
Springfield, Illinois 62704  
(217) 785-9881 (voice)  
(217) 782-6133 (TDD)

The full text of the Adopted Amendments begins on the next page:

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## TITLE 32: ENERGY

## CHAPTER II: DEPARTMENT OF NUCLEAR SAFETY

## SUBCHAPTER b: RADIATION PROTECTION

## PART 360

USE OF X-RAYS IN THE HEALING ARTS INCLUDING MEDICAL, DENTAL,  
PODIATRY, AND VETERINARY MEDICINE

Section	Scope
360.10	Definitions
360.20	General Requirements and Administrative Controls
360.30	General Equipment and Operation Requirements for Diagnostic X-Ray Systems
360.40	Additional Requirements for Use of Diagnostic X-Ray Systems in the Healing Arts of Medicine, Podiatry and Chiropractic
360.50	Fluoroscopic Systems
360.60	Radiographic Systems Other Than Fluoroscopic, Dental, Veterinary or Computed Tomography Systems
360.70	Mobile/Portable Radiographic Systems Other Than Systems Used Solely for Mammography (Repealed)
360.71	Additional Requirements for Facilities Performing Mammography
360.75	Computed Tomography (CT) Systems
360.80	Photofluorographic Systems (Repealed)
360.90	Dental Radiographic Systems
360.100	Veterinary Radiographic Systems
360.110	Therapy Systems Operating Below 1 MeV
360.120	Therapy Systems Operating at 1 MeV or Greater
APPENDIX A	Medical Radiographic Entrance Exposure Measurement Protocol
APPENDIX B	Mammography Dose Measurement Protocol
APPENDIX C	Mammography Phantom Image Evaluation
APPENDIX D	Computed Tomography Dose Measurement Protocol
APPENDIX E	Minimum Quality Control Program for Medical Accelerators
ILLUSTRATION A	Thimble and Pancake Chamber-Radiation Measuring Devices
ILLUSTRATION B	Mammography Dose Evaluation Graph (Repealed)
TABLE A	Mammography Dose Evaluation Table
TABLE B	Half-Value Layer as a Function of Tube Potential
TABLE C	Entrance Exposure Limits Per Intraoral Bitewing Film (Repealed)

AUTHORITY: Implementing and authorized by the Radiation Protection Act of 1990 [420 ILCS 40].

SOURCE: Filed April 20, 1974 by the Department of Public Health; old rules repealed, new rules adopted at 4 Ill. Reg. 25, p. 157, effective July 1, 1980; transferred to the Department of Nuclear Safety by P.A. 81-1516, effective December 3, 1980; codified at 7 Ill. Reg. 16406; amended at 10 Ill. Reg. 13271, effective July 28, 1986; amended at 13 Ill. Reg. 803, effective April 1, 1989; amended at 15 Ill. Reg. 6180, effective April 16, 1991; amended at 17 Ill. Reg. 17972, effective October 15, 1993; amended at 18 Ill. Reg. 11524, effective

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July 11, 1994; emergency amendment adopted at 19 Ill. Reg. 273, effective December 30, 1994, for a maximum of 150 days; amended at 19 Ill. Reg. 8284, effective JUN 12 1995.

## Section 360.120 Therapy Systems Operating at 1 MeV or Greater

In addition to the provisions of Sections 360.10 through 360.30, the requirements of this Section apply to particle accelerator systems operating at energies of 1 MeV or greater. Accelerator systems capable of producing radioactive materials in excess of the exempt quantities specified in 32 Ill. Adm. Code 330.Appendix B shall also be licensed pursuant to the provision of 32 Ill. Adm. Code 330.

## a) Facility Design

1) The registrant shall consult a therapeutic radiological physicist in the design of a particle accelerator installation.

## 2) Shielding Requirements

A) Each accelerator installation shall be provided with such primary and secondary barriers as are necessary to assure compliance with 32 Ill. Adm. Code 340.

B) Facility design information for all accelerators installed after October 15, 1993 shall be submitted to the Department for review prior to installation. Information submitted to the Department shall include, but need not be limited to, the following:

- i) Name and address of the planned installation;
  - ii) Name, address and telephone number of the therapeutic radiological physicist who was consulted in the design of the installation;
  - iii) A scale drawing that includes the location of the accelerator, control panel and doors to the room;
  - iv) The structural composition and thickness of all walls, doors, partitions, floor and ceiling of the installation;
  - v) The occupancy of areas adjacent to the installation;
  - vi) Calculations that demonstrate the adequacy of the amount of shielding specified for each primary and secondary protective barrier; and
  - vii) Projected weekly dose rates in areas adjacent to the installation.
- 3) Interlock. An interlock shall be installed on each door of the therapy room. The interlock shall be wired into the electrical circuit in such a manner that when the door is opened for any reason, the generation of radiation beams will automatically be terminated and irradiation can be resumed only by manually resetting the controls on the control panel after the door is closed.
- 4) Warning lights that indicate when the beam is on shall be provided in a readily observable position near the outside of all



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access doors to the therapy room.

- 5) Viewing System. Windows, mirrors, closed-circuit television or an equivalent system shall be provided to permit continuous visual observation of the patient during irradiation and shall be located so that the operator can observe the patient from the control panel.

AGENCY NOTE: When the primary viewing system is electronic, a back-up system should be available for use in the event of failure of the primary system in order to ensure compliance with the requirements of subsection (q)(1)(H) below.

- 6) The facility design shall permit two-way aural communications between the patient and the operator at the control panel.
- 7) Signs required by 32 Ill. Adm. Code 340.920 shall be posted in the facility.
- 8) The control panel shall be outside the therapy room.
- 9) The facility design shall include emergency off buttons, at locations that allow shutting off the machine from inside the therapy room and at the control panel.
- 10) The doors to the therapy room shall be designed to allow opening from the inside at all times and shall be capable of being opened manually.

## b) Equipment Requirements

- 1) Leakage radiation to the patient area shall be measured for each accelerator. Measurements shall be repeated following maintenance or service performed on the accelerator, as determined by a therapeutic radiological physicist.

A) For operating conditions producing maximum leakage radiation, the absorbed dose due to leakage radiation, excluding neutrons, at any point in a circular plane of 2 meters radius centered on and perpendicular to the central axis of the beam at the isocenter or normal treatment distance and outside the maximum useful beam size shall not exceed 0.1 percent of the maximum absorbed dose of the unattenuated useful beam measured at the point of intersection of the central axis of the beam and the plane surface. Radiation measurements shall be averaged over an area up to but not exceeding 100 square centimeters.

B) Records of the most recent radiation leakage measurements and the machine parameters used during the survey shall be maintained at the facility for inspection by the Department.

- 2) Beam-Limiting Devices. Adjustable or interchangeable beam-limiting devices shall transmit no more than two percent of the useful beam at the normal treatment distance for the portion of the useful beam that is to be attenuated by the beam-limiting device. The neutron component of the useful beam shall not be subject to this requirement. This requirement does not apply to auxiliary blocks or materials placed in the useful beam to shape the useful beam to the individual patient.

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- 3) Source-Skin Distance (SSD) Indication

A) Means shall be provided to indicate the SSD.  
 B) The SSD shall be indicated in centimeters and/or inches and the measured SSD shall correspond to the indicated value to within 0.5 percent.

## 4) Filters

A) Each filter that is removable from the system shall be clearly marked with an identification number. Documentation available at the control panel shall contain a description of the filter. For wedge filters, the wedge angle and maximum design field size shall appear on the wedge or wedge tray.

B) If the machine calibration measurements required by subsection (d) below relate exclusively to operation with an x-ray field flattening filter or electron beam scattering filter in place, such filters shall be removable from the machine only by the use of tools.

C) Equipment utilizing a system of wedge filters, interchangeable field flattening filters or interchangeable beam scattering filters shall meet the following requirements:

- i) The equipment shall have an interlock that prevents irradiation if any filter selection operation carried out in the therapy room is not consistent with the selection of filter, beam type or beam energy at the control panel; and
- ii) The equipment shall have an interlock system that prevents irradiation if any selected filter is not in the correct position.

5) Beam Monitoring System. All accelerator systems shall be provided with a beam monitoring system in the radiation head capable of monitoring and terminating irradiation.

A) Each beam monitoring system shall have a display at the treatment control panel which shall register accumulated monitor units.

B) The beam monitoring system shall terminate irradiation when the preselected number of monitor units has been detected by the system.

C) Accelerator systems ~~installed~~ manufactured after October 15, 1993 shall be equipped with a primary and a secondary beam monitoring system. Each beam monitoring system shall be independently capable of monitoring and terminating irradiation.

D) For units with a secondary beam monitoring system, the primary beam monitoring system shall terminate irradiation when the preselected number of monitor units has been detected. The secondary beam monitoring system shall terminate irradiation if the primary system fails.

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- E) An interlock device shall prevent irradiation if any beam monitoring system is inoperable.
- F) In the event of power failure, the display information required in subsection (b)(5)(A) above, shall be retrievable in at least one system for 20 minutes.
- 6) Beam Symmetry. For equipment equipped with beam bending magnets, the symmetry of the radiation beam in two orthogonal directions shall be monitored before the beam passes through the beam-limiting device. The equipment shall provide means of terminating irradiation automatically if the difference in dose rate between one region and another region exceeds criteria specified by the manufacturer.
- 7) Control Panel
- A) Selection and Display of Monitor Units
- i) Irradiation shall not be possible until a selection of a number of monitor units has been made at the control panel.
- ii) The selected number of monitor units shall be displayed at the control panel until reset.
- iii) After completion of irradiation, it shall be necessary to reset the accumulated beam monitor units before treatment can be restarted.
- B) Termination of Irradiation. It shall be possible to terminate irradiation and equipment movements at any time from the operator's position at the control panel.
- C) Selection of Radiation Type. Equipment capable of both photon and electron therapy shall meet the following requirements:
- i) Irradiation shall not be possible until the radiation type has been selected and displayed at the control panel.
- ii) An interlock shall be provided to ensure that the machine will emit only the radiation type that has been selected.
- iii) An interlock shall be provided to prevent irradiation with x-rays, except to obtain port films, when electron applicators are installed.
- iv) An interlock shall be provided to prevent irradiation with electrons if accessories specific for x-ray therapy are installed.
- D) Section of Radiation Energy. Equipment capable of producing radiation beams of different energies shall meet the following requirements:
- i) Irradiation shall not be possible until a selection of energy has been made at the control panel.
- ii) An interlock shall be provided to ensure that the machine will emit only the nominal energy of radiation that has been selected.

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- iii) The nominal value of the energy selected shall be displayed at the treatment control panel.
- E) Selection of Stationary or Moving Beam Therapy. Equipment capable of both stationary and moving beam therapy shall meet the following requirements:
- i) Irradiation shall not be possible unless either stationary therapy or moving beam therapy has been selected at the control panel. The selection of stationary therapy may be performed as a default selection if moving beam therapy is not selected.
- ii) An interlock shall be provided to ensure that the machine will operate only in the mode that has been selected.
- iii) An interlock shall be provided to terminate irradiation if the gantry fails to move properly during moving beam therapy.
- iv) Means shall be provided to prevent movement of the gantry during stationary therapy.
- v) The mode of operation shall be displayed at the control panel.
- F) Timers. A timer shall be provided with a display at the treatment control panel, as a back-up device to the beam monitoring system.
- i) The timer shall permit presetting and determination of exposure times.
- ii) The timer shall be a cumulative timer which activates with the production of radiation and retains its reading after irradiation is interrupted or terminated.
- iii) The timer shall terminate irradiation when a preselected time has elapsed if the beam monitoring system has not previously terminated irradiation. If set at zero, the timer shall not permit irradiation.
- G) Security. The control panel shall be capable of being locked to prevent unauthorized use.
- c) Radiation Protection Survey. A radiation protection survey shall be performed by a therapeutic radiological physicist on each accelerator. The registrant shall maintain at the facility a copy of the most recent radiation protection survey report for review by the Department. Radiation protection surveys shall meet the following additional requirements:
- 1) For each accelerator installed after October 15, 1993, a radiation protection survey shall be performed by a physicist before the system is first used for irradiation of a patient. The physicist who performs the radiation protection survey shall be a person who did not consult in the design of the accelerator installation (see subsection (a) above) and is not employed by or within any corporation or partnership with the person who



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consulted in the design of the installation.

- 2) A radiation protection survey shall be performed by a physicist after any change in the accelerator or facility that might produce a radiation hazard. Such survey shall be performed before the system is used to treat patients.
  - 3) The survey report shall include, but need not be limited to, the following:
    - A) A diagram of the facility which details building structures and the position of the control panel, accelerator and associated equipment;
    - B) A description of the accelerator system including the manufacturer, model number, beam type and beam energy range;
    - C) A description of the instrumentation used to determine radiation measurements, including the date and source of the most recent calibration for each instrument used;
    - D) Conditions under which radiation measurements were taken;
    - E) Survey data including:
      - i) Projected weekly dose equivalent in areas adjacent to the therapy room; and
      - ii) A description of workload, use and occupancy factors employed in determining the projected weekly dose equivalent.
  - 4) The registrant shall retain a copy of the radiation protection survey report and a copy of the report shall be provided to the Department within 30 days after completion of the survey.
  - 5) Any deficiencies detected during the radiation protection survey that would constitute or result in a violation of 32 Ill. Adm. Code 340 shall be corrected prior to using the machine for treatment of patients.
  - 6) The facility shall be operated in compliance with any limitations indicated by the therapeutic radiological physicist as a result of the radiation protection survey.
- d) Machine Calibration. Calibration measurements shall be performed on each accelerator system by a therapeutic radiological physicist before the therapy system is first used for irradiation of a patient. Subsequent calibrations shall be performed at intervals not exceeding 1 year.
- 1) Calibration measurements shall include, but need not be limited to, the following determinations:
    - A) Verification that the equipment is operating in compliance with the design specifications concerning the light localizer, variation in the axes of rotation for the table, gantry and jaw system and the beam flatness and symmetry at the specified depth;
    - B) The absorbed dose rate at various depths in water for the range of field sizes used, for each beam type and energy;
    - C) The uniformity of the radiation field and any dependency upon the direction of the beam;

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- D) Verification that existing depth-dose data and isodose charts applicable to the specific machine continue to be valid or are updated to existing machine conditions; and
  - E) Verification of transmission factors for all accessories such as wedges, shadow trays and compensators, as applicable.
- 2) Calibration radiation measurements shall be performed using a dosimetry system that has been calibrated by a calibration laboratory accredited by the American Association of Physicists in Medicine (AAPM), and meets the requirements of either subsection (2) (A) or (B) below:
    - A) The calibration shall have been performed within the previous 2 years and after any servicing that may have affected calibration of the dosimetry system; or
    - B) The dosimetry system shall have been calibrated within the previous 4 years and shall have been:
      - i) Compared at annual intervals following the calibration to a dosimetry system with calibration obtained within the previous 2 years from a calibration laboratory accredited by the AAPM, and the results of the comparison indicate the calibration factor has not changed by more than two percent; or
      - ii) Subjected to a testing protocol that has been established by a therapeutic radiological physicist and that provides for checks of dosimetry constancy and provides for corrective action when results deviate more than two percent from the expected values.
- AGENCY NOTE: Redundancy is a basic tenet of radiation dosimetry, therefore the therapeutic radiological physicist should establish a program of inter-comparison and constancy testing of calibrated dosimetry instruments to assure, as much as possible, the accuracy, reliability and reproducibility of the measurements performed with those instruments.
- 3) Calibration of the radiation output of the accelerator shall be performed in accordance with:
    - A) The protocol of Task Group 21, Radiation Therapy Committee, American Association of Physicists in Medicine (AAPM), entitled "A Protocol for the Determination of Absorbed Dose from High-Energy Photon and Electron Beams" published in Medical Physics, Volume 10, pages 741-771 (1983), exclusive of subsequent amendments or editions; or
    - B) The protocol of the Scientific Committee on Radiation Dosimetry of the AAPM, entitled "Protocol for the Dosimetry of X and Gamma Ray Beams with Maximum Energies Between 0.6 and 50 MeV", published in Physics, Medicine, and Biology, Volume 16, pages 379-396 (1971), exclusive of subsequent

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amendments or editions; or

C) Other machine calibration protocols provided that the registrant has submitted the protocols to the Department and the protocols cover the same topics as those contained in subsections (d)(3)(A) and (B), above.

AGENCY NOTE: Copies of the two protocols referenced above are available for public inspection at the Department of Nuclear Safety, 1035 Outer Park Drive, Springfield, Illinois. The protocols may also be obtained directly from the AAPM, One Physics Ellipse, College Park MD 20740-3846.

4) The radiation output of each therapy system shall be independently verified at intervals not to exceed 2 years. Independent verification shall consist of:

A) Verification of the machine output by a therapeutic radiological physicist who is not employed at the facility and does not perform the annual calibration; or

B) Alternate methods of verification of machine output, such as the use of mailed dosimetry devices, that use devices and procedures approved by the AAPM.

5) Machine calibration records shall include identification of the accelerator calibrated, the results of the tests specified in subsection (d)(1) above and shall be signed and dated by the therapeutic radiological physicist who performed the calibration.

6) The registrant shall maintain at the facility, for a period of 5 years, records of machine calibrations, instrument calibrations and independent verifications of machine output for inspection by the Department.

e) Quality Assurance Checks. A quality assurance (QA) check shall be performed by a therapeutic radiological physicist on each therapy system each calendar month. The interval between QA checks shall not exceed 45 days. QA checks shall also be performed after any change which could affect the radiation output, spatial distribution or other characteristics of the therapy beam, as determined by the physicist. Quality assurance checks shall also meet the following requirements:

1) Quality assurance checks shall include determination of:

A) The radiation output for a set of operating conditions specified by a therapeutic radiological physicist; and

B) The coincidence of the radiation field and the field indicated by the localizing device.

2) Radiation measurements shall be obtained using a dosimetry system that:

A) Meets the requirements of subsection (d)(2) above; or

B) Has been directly compared by a therapeutic radiological physicist within the previous year with a dosimetry system which meets the requirements of subsection (d)(2) above.

3) The therapeutic radiological physicist shall establish criteria for quality assurance check measurements and shall determine corrective actions to be implemented if the criteria are

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exceeded.

4) The registrant shall retain a record of quality assurance check measurements for inspection by the Department for a period of 5 years. The record shall include the date of the quality assurance check, identification of the accelerator, results of the quality assurance check measurements and the signature of the individual who performed the quality assurance check.

f) Quality Control. A comprehensive quality control program shall be implemented as specified by a therapeutic radiological physicist and shall meet the following requirements:

1) The program shall be designed to test the operation and performance of the accelerator in order to maintain radiation safety and clinical reliability. The program shall include as a minimum the items listed in Section 360. Appendix E.

2) The physicist shall specify the tolerance and frequency of performance for each item of the quality control program.

3) The physicist shall specify what actions are to be taken for any item exceeding the specified tolerance.

4) The physicist shall review, sign and date the results of the quality control program each calendar month.

AGENCY NOTE: The elements of a comprehensive quality control program are described in Report No. 13 published by the AAPM, entitled "Physical Aspects of Quality Assurance in Radiation Therapy" (1984). A copy of this report is available for public inspection at the Department of Nuclear Safety, 1035 Outer Park Drive, Springfield, Illinois. Report No. 13 may also be obtained directly from the AAPM, One Physics Ellipse, College Park MD 20740-3846.

g) Operating Procedures. The registrant shall have a therapeutic radiological physicist establish written operating and emergency procedures and shall ensure that the procedures are implemented before the accelerator is used for treatment of patients. Operators of the accelerators shall receive training in the application of the procedures before using the accelerator to irradiate patients. A copy of the current operating and emergency procedures shall be maintained at the treatment control panel for use and review.

1) Operating procedures to be implemented shall include instructions that:

A) The accelerator is used in such a manner that patients, workers and the general public are protected from radiation hazards and the provisions of 32 Ill. Adm. Code 340 are met;

B) No accelerator shall be left unattended unless it is secured against unauthorized use;

C) The safety interlock system shall not be used to turn off the beam except in an emergency;

D) The safety interlocks and warning systems required in subsections (a)(3), (a)(4) and (a)(9) above shall be tested for proper operation at monthly intervals;



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- E) Mechanical supporting or restraining devices shall be used when a patient must be held in position for radiation therapy;
- F) No individual other than the patient shall be in the therapy room during irradiation;
- G) Start-up procedures for the accelerator, specified by the therapeutic radiological physicist, shall be performed daily prior to treatment of patients; and
- H) The accelerator shall not be used for treatment of patients unless the operator can maintain visual observation of the patient and audible communication with the patient.
- 2) Emergency procedures shall include instructions for alternate methods for termination of irradiation and machine movements.
- AGENCY NOTE: The operating and emergency procedures should contain as a minimum the machine manufacturer's operations manual for the accelerator.
- 3) Operating and emergency procedures shall include instructions for contacting the therapeutic radiological physicist when operational problems or emergencies occur and the actions that are to be taken until the physicist can be contacted.
- h) Machine Maintenance. The therapeutic radiological physicist shall establish accelerator maintenance procedures that meet the following requirements:
- 1) Whenever service or maintenance is performed on the accelerator, a therapeutic radiological physicist shall be notified of such service or maintenance.
  - 2) Following completion of service or maintenance involving radiation beam generation, beam steering or monitoring of the beam, but before the accelerator is again used for treatment of patients, the therapeutic radiological physicist shall review the service or maintenance report and shall determine whether a calibration or quality assurance check is necessary to verify the characteristics of the beam(s). If the therapeutic radiological physicist determines that a calibration or quality assurance check is necessary, the calibration or quality assurance check shall be performed before the accelerator is again used for treatment of patients.
  - 3) The therapeutic radiological physicist shall establish the frequency of routine maintenance and ensure that records of all service and maintenance performed on the machine are maintained at the facility.
  - 4) The therapeutic radiological physicist shall sign and date records of all service and maintenance performed on the machine.
  - 5) The therapeutic radiological physicist shall specify the qualifications of maintenance personnel and prohibit non-qualified personnel from repairing the machine or adjusting parameters on the machine.
  - 6) Circuit diagrams of the accelerator and interlock systems shall

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be maintained at the facility and kept current.

(Source: Amended at 19 Ill. Reg. 8284, effective JUN 12 1995)

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- 1) Heading of the Part: Child Support Enforcement
- 2) Code Citation: 89 Ill. Adm. Code 160
- 3) Section Number: Adopted Action:  
160.12 New Section
- 4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, par. 12-13)[305 ILCS 5/Art. 12-13] and Public Act 88-307.
- 5) Effective Date of Amendments: June 15, 1995
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Do these Amendments contain incorporations by reference? No
- 8) Date Filed in Agency's Principal Office: June 15, 1995
- 9) Notice of Proposal Published in Illinois Register: September 23, 1994 (18 Ill. Reg. 14296)
- 10) Has JCAR issued a Statement of Objections to these Adopted Amendments? No
- 11) Differences between proposal and final version: The following changes were made to the text of the proposed amendments:
1. The Source was updated with the previous actions.
  2. Section 160.12(b) was changed as follows:  
"b) A request for explanation through the Administrative Accountability Analysis process may be made by the recipient or applicant in person, by mail or by telephone. If the recipient or applicant requests an explanation by telephone, the request for an explanation form will be sent to the recipient or applicant."
  3. Section 160.12(c) was changed as follows:  
"c) The request for an explanation must be in writing, signed by the recipient or applicant or his or her authorized representative and."
  4. Sections 160.12 (d) and (e) were added as follows:  
"d) A recipient or applicant who is represented by another person

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- must identify that person as his or her representative in writing."
- "e) If a request must be processed by another unit, such as the Account Review Unit, the inquiry shall be referred to the unit and the recipient or applicant shall be notified in writing of the referral."
5. Section 160.12(c) was renumbered as Section 160.12(f).
6. Section 160.12(d) was renumbered as Section 160.12(g), "with its explanation" was added after "respond" and "written" was added after "timely".
7. Section 160.12(e) was renumbered as Section 160.12(h) and "with an explanation" was added after the first word "respond".
8. Section 160.12(f) was renumbered as 160.12(i) and " , signed by the recipient or applicant or his or her authorized representative" was added after "writing".
9. Section 160.12(j) was added as follows:  
"j) If the recipient or applicant requests a conference by telephone, the request for conference form will be sent to the recipient or applicant."
10. Sections 160.12(g) through 160.12(k) were renumbered as Sections 160.12(k) through 160.12(o).
11. In Section 160.12(o), "written" was added before "request".
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes
- 13) Will these Amendments replace Emergency Amendments currently in effect?  
No
- 14) Are there any Amendments pending on this Part? Yes
- | Sections | Proposed Action | Illinois Register Citation             |
|----------|-----------------|--|
| 160.70   | Amendment       | November 14, 1994 (18 Ill. Reg. 16510) |
- 15) Summary and Purpose of Amendments: This rulemaking is necessary to implement the provisions of Public Act 88-307 regarding the Administrative Accountability Process. The Administrative Accountability Process is used when the applicant or client is not satisfied with the handling or



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explanation received from the Department regarding his or her child support case. These amendments place the provisions of the Administrative Accountability Process into rule.

As a result of these amendments, a recipient of or an applicant for child support enforcement services may request an explanation of any decision, not appealable and/or not subject to other review, denying or terminating services or concerning the Department's or its contractor's alleged failure to provide services or the provision of services in an amount or manner that is considered inadequate. The request for an explanation must be in writing and specify the decision, alleged failure to act or deficient action that is the basis for the request and be submitted to the Department within 60 days after the action or alleged failure to act. At the option of the applicant or recipient, the Department's explanation will be provided orally in an interview, in writing, or both orally and in writing. The Department will respond to a timely request for an explanation within 30 days from the date of the request.

A recipient of or an applicant for child support enforcement services may request a conference if the Department fails to respond to a request for an explanation or fails to respond in a manner satisfactory to the recipient or applicant within 30 days from the date of the request for an explanation. A request for a conference must be in writing and if applicable, state why the Department's explanation was not satisfactory, indicate whether the recipient or applicant wants the conference to be conducted in person or by telephone and be submitted to the Department within 60 days after the explanation was provided by the Department, or within 60 days after the time for providing an explanation expired. If a timely request for a conference is received by the Department, the office of the administrator of the child support enforcement program will provide a conference.

A recipient or applicant who has requested a conference may review the Department's record pertaining to the explanation before or at the conference, be represented in the conference by a person of his or her own choosing and present relevant matters at the conference in support of his or her position. No part of the Department's cost for providing a conference will be borne by the recipient or applicant.

The conference will be conducted by a representative of the Department's child support enforcement program who did not participate in the alleged action or inaction which is the subject of the conference. The conference will be conducted and written results of the conference provided to all interested parties within 60 days from the date of submittal of the request for a conference, unless there is delay in the conduct of the conference brought about by the recipient or applicant or his or her representative.

## DEPARTMENT OF PUBLIC AID

## NOTICE OF ADOPTED AMENDMENTS

16) Information and questions regarding these Adopted Amendments shall be directed to:

Name: Judy Umunna  
Address: Bureau of Rules and Regulations  
Illinois Department of Public Aid  
100 South Grand Avenue East, Third Floor  
Springfield, Illinois 62762  
Telephone: (217) 524-3215

The full text of the Adopted Amendments begins on the next page:

## DEPARTMENT OF PUBLIC AID

## NOTICE OF ADOPTED AMENDMENT(S)

TITLE 89: SOCIAL SERVICES  
CHAPTER I: DEPARTMENT OF PUBLIC AID  
SUBCHAPTER f: COLLECTIONS

## PART 160

## CHILD SUPPORT ENFORCEMENT

## SUBPART A: GENERAL PROVISIONS

## Section

- 160.1 Incorporation by Reference  
160.5 Definitions  
160.10 Child Support Enforcement Program  
160.12 Administrative Accountability Process  
160.15 Application Processing Fee for IV-D Non-AFDC Cases  
160.20 Assignment of Rights to Support  
160.25 Recoupment

## SUBPART B: COOPERATION WITH CHILD SUPPORT ENFORCEMENT

## Section

- 160.30 Cooperation With Support Enforcement Program  
160.35 Good Cause For Failure to Cooperate With Support Enforcement  
160.40 Proof of Good Cause For Failure to Cooperate With Support Enforcement  
160.45 Suspension of Child Support Enforcement Upon Finding of Good Cause

SUBPART C: ESTABLISHMENT AND MODIFICATION OF  
CHILD SUPPORT ORDERS

## Section

- 160.60 Establishment of Support Obligations  
160.65 Modification of Support Obligations

## SUBPART D: ENFORCEMENT OF CHILD SUPPORT ORDERS

## Section

- 160.70 Enforcement of Support Orders  
160.75 Withholding of Income to Secure Payment of Support  
160.77 Past Due Support Information to State Occupational Licensing Agencies  
160.80 Amnesty - 20% Charge  
160.85 Diligent Efforts to Serve Process

## SUBPART E: EARMARKING CHILD SUPPORT PAYMENTS

## Section

- 160.90 Earmarking Child Support Payments

## SUBPART F: DISTRIBUTION OF SUPPORT COLLECTIONS

## Section

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- 160.100 Distribution of Child Support For AFDC Recipients  
160.110 Distribution of Child Support For Former AFDC Recipients Who Continue To Receive Child Support Enforcement Services  
160.120 Distribution Of Child Support Collected While The Client Was An AFDC Recipient, But Not Yet Distributed At The Time The AFDC Case Is Cancelled  
160.130 Distribution Of Intercepted Income Tax Refunds and Other State Payments  
160.132 Distribution of Child Support for Non-AFDC Clients  
160.134 Distribution of Child Support for Interstate Cases  
160.136 Distribution of Support Collected in IV-E Foster Care Maintenance Cases  
160.138 Distribution of Child Support for Medical Assistance No Grant Cases

## SUBPART G: STATEMENT OF CHILD SUPPORT ACCOUNT ACTIVITY

## Section

- 160.140 Statement Of Child Support Account Activity

## SUBPART H: DEPARTMENT REVIEW OF DISTRIBUTION OF CHILD SUPPORT

## Section

- 160.150 Department Review Of Distribution Of Child Support For AFDC Recipients  
160.160 Department Review Of Distribution Of Child Support For Former AFDC Recipients

**AUTHORITY:** Implementing and authorized by Article X and Sections 4-1.7, 12-4.3, and 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, pars. 10-1 et seq., 4-1.7, 12-4.3, and 12-13) [305 ILCS 5/Art. X and 4-1.7, 12-4.3 and 12-13].

**SOURCE:** Recodified from 89 Ill. Adm. Code 112.78 through 112.86 and 112.88 at 10 Ill. Reg. 11928; amended at 10 Ill. Reg. 19990, effective November 14, 1986; emergency amendment at 11 Ill. Reg. 4800, effective March 5, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 9129, effective April 30, 1987; amended at 11 Ill. Reg. 15208, effective August 31, 1987; emergency amendment at 11 Ill. Reg. 1563, effective December 31, 1987, for a maximum of 150 days; amended at 12 Ill. Reg. 9065, effective May 16, 1988; amended at 12 Ill. Reg. 18185, effective November 4, 1988; emergency amendment at 12 Ill. Reg. 20835, effective December 2, 1988, for a maximum of 150 days; amended at 12 Ill. Reg. 22278, effective January 1, 1989; amended at 13 Ill. Reg. 4268, effective March 21, 1989; amended at 13 Ill. Reg. 7761, effective May 22, 1989; amended at 13 Ill. Reg. 14385, effective September 1, 1989; amended at 13 Ill. Reg. 16738, effective October 12, 1989; amended at 14 Ill. Reg. 18759, effective November 9, 1990; amended at 15 Ill. Reg. 1034, effective January 21, 1991; amended at 16 Ill. Reg. 1852, effective January 20, 1992; amended at 16 Ill. Reg. 9997, effective June 15, 1992; amended at 17 Ill. Reg. 2272, effective February 11, 1993; amended at 17 Ill. Reg. 18844, effective October 18, 1993; amended at 18



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Ill. Reg. 697, effective January 10, 1994; amended at 18 Ill. Reg. 12052, effective July 25, 1994; amended at 18 Ill. Reg. 15083, effective September 23, 1994; amended at 19 Ill. Reg. 17886, effective November 30, 1994; amended at 19 Ill. Reg. 1314, effective January 30, 1995; amended at 19 Ill. Reg. 1314, effective JUN 15 1995.

## SUBPART A: GENERAL PROVISIONS

## Section 160.12 Administrative Accountability Process

- a) A recipient of or an applicant for child support enforcement services may request an explanation of any decision, not appealable and/or not subject to other review, denying or terminating services or concerning the Department's or its contractor's alleged failure to provide services or the provision of services in an amount or manner that is considered inadequate.
- b) A request for explanation through the Administrative Accountability Analysis process may be made by the recipient or applicant in person, by mail or by telephone. If the recipient or applicant requests an explanation by telephone, the request for an explanation form will be sent to the recipient or applicant.
- c) The request for an explanation must be in writing, signed by the recipient or applicant or his or her authorized representative and:
  - 1) specify the decision, alleged failure to act or deficient action that is the basis for the request; and
  - 2) be submitted to the Department within 60 days after the action or alleged failure to act.
- d) A recipient or applicant who is represented by another person must identify that person as his or her representative in writing.
- e) If a request must be processed by another unit, such as the Account Review Unit, the inquiry shall be referred to the unit and the recipient or applicant shall be notified in writing of the referral.
- f) At the option of the applicant or recipient, the Department's explanation shall be provided orally in an interview, in writing, or both orally and in writing.
- g) The Department shall respond with its explanation to a timely written request for an explanation within 30 days from the date of the request.
- h) A recipient of or an applicant for child support enforcement services may request a conference if the Department fails to respond with an explanation to a request for an explanation or fails to respond in a manner satisfactory to the recipient or applicant within 30 days from the date of the request for an explanation.
- i) A request for a conference must be in writing, signed by the recipient or applicant or his or her authorized representative and:
  - 1) if applicable, state why the Department's explanation was not satisfactory;
  - 2) indicate whether the recipient or applicant wants the conference to be conducted in person or by telephone; and

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- 3) be submitted to the Department within 60 days after the explanation was provided by the Department, or within 60 days after the time for providing an explanation expired.
- j) If the recipient or applicant requests a conference by telephone, the request for conference form will be sent to the recipient or applicant.
- k) If a timely request for a conference is received by the Department, the office of the administrator of the child support enforcement program shall provide a conference.
- l) A recipient or applicant who has requested a conference may:
  - 1) review the Department's record pertaining to the explanation before or at the conference;
  - 2) be represented in the conference by a person of his or her own choosing; and
  - 3) present relevant matters at the conference in support of his or her position.
- m) No part of the Department's cost for providing a conference shall be borne by the recipient or applicant.
- n) A conference shall be conducted by a representative of the Department's child support enforcement program who did not participate in the alleged action or inaction which is the subject of the conference.
- o) A conference shall be conducted and written results of the conference provided to all interested parties within 60 days from the date of submittal of the written request for a conference, unless there is delay in the conduct of the conference occasioned by the recipient or applicant or his or her representative.

(Source: Added at 19 Ill. Reg. 82981, effective JUN 15 1995)

## ILLINOIS STUDENT ASSISTANCE COMMISSION

## NOTICE OF ADOPTED RULES

1) Heading of the Part: Christa McAuliffe Fellowship Program

2) Code Citation: 23 Ill. Adm. Code 2766

3) Section Number: Adopted Action:

2766.10	New
2766.20	New
2766.30	New
2766.40	New

4) Statutory Authority: Implementing Section 65.60 of the Higher Education Student Assistance Act [110 ILCS 947/65.60] and Title V, Part C, Subpart 2 of the Higher Education Act of 1965, as amended (20 U.S.C. 1107) and authorized by Section 20(f) of the Higher Education Student Assistance Act [110 ILCS 947/20(f)].

5) Effective Date of Rule(s): July 1, 1995

6) Does this rulemaking contain an automatic repeal date? No

7) Does this rule contain incorporations by reference? No

8) Date Filed in Agency's Principal Office: June 5, 1995

9) Notice(s) of Proposal Published in Illinois Register: January 27, 1995, 19 Ill. Reg. 1275

10) Has JCAR issued a Statement of Objections to these rule(s)? No

11) Difference(s) between proposed and final version: Changes in this rulemaking were merely minor or technical in nature and were made in response to suggestions from the public, the Administrative Code Division and/or the Joint Committee on Administrative Rules.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes

13) Will these rules replace an emergency rule currently in effect? No

14) Are there any amendments pending on this Part? No

15) Summary and Purpose of Rules: Public Act 88-0228 transferred the administrative responsibility for ten scholarship and grant programs from the Illinois State Board of Education (ISBE) to ISAC. One of these programs was the federal Christa McAuliffe Fellowship Program, under which fellowships are awarded to reward excellence in teaching by encouraging outstanding teachers to continue their education or to pursue other

## ILLINOIS STUDENT ASSISTANCE COMMISSION

## NOTICE OF ADOPTED RULES

selected, related activities. The McAuliffe Fellowship Program is governed primarily by federal statute (Title V, Part C, Subpart 2 of the Higher Education Act of 1965, as amended) and federal regulations (34 CFR 237).

These adopted rules will implement ISAC's discretionary authority as the program administrator for the McAuliffe Fellowship Program in the State of Illinois. ISAC serves as the program administrator pursuant to an interagency agreement with ISBE. These adopted rules set forth the eligibility criteria for applicants, the selection criteria for McAuliffe Fellows, and the procedures for the awarding of assistance under this program.

16) Information and questions regarding these rules shall be directed to:

Ms. Raquel G. Martinez  
Compliance Counsel  
Illinois Student Assistance Commission  
1755 Lake Cook Road  
Deerfield, IL 60015  
(708) 948-8500

The full text of the rules begins on the next page.



## ILLINOIS STUDENT ASSISTANCE COMMISSION

## NOTICE OF ADOPTED RULES

TITLE 23: EDUCATION AND CULTURAL RESOURCES

SUBTITLE A: EDUCATION

CHAPTER XIX: ILLINOIS STUDENT ASSISTANCE COMMISSION

## PART 2766

## CHRISTA McAULIFFE FELLOWSHIP PROGRAM

Section	Summary and Purpose
2766.10	Definitions
2766.20	Fellow Eligibility
2766.30	Program Procedures

**AUTHORITY:** Implementing Section 65.60 of the Higher Education Student Assistance Act [110 ILCS 947/65.60] and Title V, Part C, Subpart 2 of the Higher Education Act of 1965, as amended (20 U.S.C. 1107) and authorized by Section 20(f) of the Higher Education Student Assistance Act [110 ILCS 947/20(f)].

**SOURCE:** Adopted at 19 Ill. Reg. 8306, effective JUL 01 1995.

## Section 2766.10 Summary and Purpose

- a) The Christa McAuliffe Fellowship Program is designed to reward excellence in teaching by encouraging outstanding teachers to continue their education, to develop innovative programs, to consult with or assist local school districts, private schools, or private school systems, and to engage in other educational activities that will improve the knowledge and skills of teachers and the education of students.
- b) Federal Regulations govern the responsibilities of the Illinois Student Assistance Commission (ISAC), Institutions, and Fellows. This Part implements ISAC's discretionary authority as the program administrator for the State of Illinois.
- c) Additional Rules and definitions are contained in the General Provisions Part at 23 Ill. Adm. Code 2700. Defined terms are indicated by the first letter being capitalized.

## Section 2766.20 Definitions

"Federal Regulations" - Regulations promulgated by the U.S. Department of Education (ED) and codified at 34 CFR 237.

"Fellow" - An individual who receives fellowship assistance under this Part.

"Qualified Applicant" - An Applicant who meets the requirements of

## ILLINOIS STUDENT ASSISTANCE COMMISSION

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Section 2766.30, Fellow Eligibility.

## Section 2766.30 Fellow Eligibility

- a) A completed application for a Christa McAuliffe Fellowship must be received in ISAC's Deerfield Office on or before January 15 preceding the Academic Year for which the fellowship is being requested.
- b) In addition to submitting an application on a timely basis, a Qualified Applicant must:
  - 1) be a United States Citizen, or Eligible Noncitizen;
  - 2) be a Resident of Illinois;
  - 3) have completed eight or more years as a full-time public or private elementary or secondary school teacher; and
  - 4) currently be a full-time teacher in a public or private elementary or secondary school.
- c) Applicants will be notified if they are not Qualified Applicants. A non-Qualified Applicant may appeal a finding of ineligibility in accordance with 23 Ill. Adm. Code 2700.70, Appeal Procedures.
- d) Applications shall include:
  - 1) A written narrative describing the proposed project to improve education for which the fellowship may be used, including:
    - A) sabbaticals for study or research directly associated with the purpose of this Fellowship Program, or academic improvement, including:
      - i) improving the teacher's knowledge base in an area of expertise, or learning a new area of expertise; and
      - ii) increasing skills and professional ability; and
      - iii) enhancing the ability of teachers to work with specialized populations, including gifted and talented children, limited-English proficient children, and children with disabilities and economically and educationally disadvantaged children;
    - B) consultation with or assistance to local school districts, private schools, or private school systems other than those with which the fellow is employed or associated;
    - C) development of special innovative programs;
    - D) projects or partnerships that involve the business community and the schools;
    - E) programs that incorporate the use and sharing of technologies to help students learn; or
    - F) expanding or replicating model programs of staff development.
  - 2) A description of the Applicant's background, including:
    - A) educational background and experience;
    - B) educational leadership activities at local, state or national level;
    - C) educational presentations at the local, state or national level;

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- D) any professional publications; and  
 E) special honors, awards and recognitions (school, community, state or national level).

## 3) Statements of recommendation from:

- A) two of the Applicant's teaching peers;  
 B) the Applicant's principal; and  
 C) the Applicant's superintendent, regarding the quality of the proposal and its educational benefit.

- e) A Fellow may not receive an award for any two consecutive years.

- f) A Fellow must return to a teaching position, in his or her place of employment prior to the fellowship award, for at least two years following completion of the fellowship. In the case of extenuating circumstances (e.g., temporary disability), a Fellow has a five-year period within which to complete this teaching requirement. (See 34 CFR 237.33(b).)

- g) Each Fellow shall keep any records and submit any reports required by ED.

- h) If the Fellow fails to carry out either the activities described in the application (see Section 2766.30(d)(1) of this Part), or the teaching requirement (see Section 2766.30(f)), the Fellow shall repay the funds received in an amount prorated to the amount of time for which either the fellowship or teaching activities were not completed. (See 34 CFR 237.34(b).)

## Section 2766.40 Program Procedures

- a) Applications for the Christa McAuliffe Fellowship Program are available for distribution to teachers from: approved high schools in Illinois; offices of District and Regional Superintendents of Education in Illinois; and the offices of ISAC in Springfield, Chicago and Deerfield.

- b) ISAC shall accept applications for Christa McAuliffe Fellowships in accordance with Section 2766.30 of this Part, Fellow Eligibility.

- c) Applications will be considered for processing as of the dates they are received in ISAC's Deerfield office.

- d) From among timely applications, Qualified Applicants shall be identified.

- e) Fellow(s) shall be selected from among the highest scoring Qualified Applicants based upon the proposal submitted with the application and in accordance with the following criteria:

- 1) Applicant's background. Information regarding the Applicant's background indicating a teacher with the skills and knowledge to complete the proposal submitted;

- 2) Proposal Usage Areas and Educational Benefits. How well the proposal applies to one of the five statutory usage areas identified in Section 533(b) of the Higher Education Act of 1965, as amended (20 U.S.C. 1105b), and how well the overall proposal improves the knowledge and skills of teachers and the education

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of students;

- 3) Recommendations. The Applicant's potential for successfully completing the fellowship, based upon the recommendations from the superintendent, principal and teacher peers;

- 4) Budget. An analysis of whether the budget line item requests relate to the written proposal and whether the amounts appear realistic to accomplish the purposes of the proposal; and

- 5) Overall Assessment. An assessment of the overall proposal as to its worth and funding for a fellowship.

- f) Each application will be read and scored and the winning Fellow(s) selected, based on his or her score and the available funding for the program for that year.

- g) The total number of fellowships awarded in a given fiscal year is contingent upon available funding. A full fellowship shall be in an amount equal to the Fellow's annual salary at his or her current place of employment for the award period. If appropriated funds are insufficient to award a full fellowship, then ISAC may choose to offer a partial fellowship in the amount of available funds. In the event that a Fellow declines the offer of a fellowship award, then ISAC may offer the award to the next highest scoring Qualified Applicant.

- h) The selected Fellow(s) will be informed of their selection by the April 15 preceding the Academic Year for which the fellowship was requested.

- i) All other Qualified Applicants will be notified that they were not selected.

- j) Federal funds are drawn down by the Illinois State Board of Education (ISBE) for disbursement by ISAC, which will issue payments to the Fellow's school district, in accordance with Federal Regulations.



## ILLINOIS STUDENT ASSISTANCE COMMISSION

## NOTICE OF ADOPTED AMENDMENT(S)

- 1) Heading of the Part: College Savings Bond Bonus Incentive Grant (BIG) Program
- 2) Code Citation: 23 Ill. Adm. Code 2771
- 3) Section numbers: Adopted Action:  
     2771.20 Amended  
     2771.30 Amended  
     2771.APPENDIX A Amended
- 4) Statutory Authority: Implementing and authorized by Section 8 of the Baccalaureate Savings Act and by Section 75 of the Higher Education Student Assistance Act [110 ILCS 920/8 and 947/75].

5) Effective Date of Rule(s) Amendments: July 1, 1995

6) Does this rulemaking contain an automatic repeal date? No.

7) Does this amendment contain incorporations by reference? No.

8) Date Filed in Agency's Principal Office: June 5, 1995

9) Notice(s) of Proposal Published in Illinois Register:

January 27, 1995, 19 Ill. Reg. 852

10) Has JCAR issued a Statement of Objections to these rule(s)? No.

11) Difference(s) between proposed and final version: Changes in this rulemaking were merely minor or technical in nature and were made in response to suggestions from the public, the Administrative Code Division and/or the Joint Committee on Administrative Rules.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes.

13) Will these amendments replace an emergency rule currently in effect? No.

14) Are there any amendments pending on this Part? No.

15) Summary and Purpose of Amendments: ISAC annually reviews its rules in order to respond to market changes and client suggestions, to implement State and federal statutory changes, and to clarify issues that have arisen during the previous year. In addition to making minor technical and grammatical changes throughout this Part, ISAC adopted the following substantive amendments: The definition of "Qualified Bond Holder" in Section 2771.20 has been modified to include bonds that have an initial

## ILLINOIS STUDENT ASSISTANCE COMMISSION

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maturity of less than 12 months. Such bonds were offered for the first time in the October 1994 bond issue. Rather than needing to hold such a bond for 12 months in order to designate a beneficiary under the BIG program, a person needs to hold the bond for only 6 months. Section 2771.30(a)(1) has been modified to reflect the existing policy that student beneficiaries must be enrolled on at least a half-time basis in order to qualify for Bonus Incentive Grants. Section 2771.30(b)(1)(E) has been amended to add an additional piece of information, the date on which the bond was issued, that is required to be provided by the bond holder to ensure that BIG grants are not issued more than once for the same bond. And finally, the table of grant amounts, in Appendix A, has been updated to include the most recent bond issue.

16) Information and questions regarding these rules shall be directed to:

Ms. Raquel G. Martinez  
 Compliance Counsel  
 Illinois Student Assistance Commission  
 1755 Lake Cook Road  
 Deerfield, IL 60015  
 (708) 948-8500

The full text of the adopted rules begins on the next page.

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## NOTICE OF ADOPTED AMENDMENT(S)

## TITLE 23: EDUCATION AND CULTURAL RESOURCES

## SUBTITLE A: EDUCATION

## CHAPTER XIX: ILLINOIS STUDENT ASSISTANCE COMMISSION

## PART 2771

## COLLEGE SAVINGS BOND BONUS INCENTIVE GRANT (BIG) PROGRAM

Section  
2771.10 Summary and Purpose

## 2771.20 Definitions

## 2771.30 Program Procedures

## APPENDIX A Table of Grant Amounts

**AUTHORITY:** Implementing and authorized by Section 8 of the Baccalaureate Savings Act [110 ILCS 920/8] and by Section 75 of the Higher Education Student Assistance Act [110 ILCS 947/75].

**SOURCE:** Emergency rules adopted at 15 Ill. Reg. 15800, effective October 21, 1991, for a maximum of 150 days; emergency expired March 19, 1992; adopted at 16 Ill. Reg. 6873, effective April 14, 1992; amended at 18 Ill. Reg. 10246, effective July 1, 1994; amended at 19 Ill. Reg. 8312, effective JUL 01 1995.

## Section 2771.20 Definitions

"College Savings Bond" - A State of Illinois General Obligation, zero coupon bond, issued pursuant to the Baccalaureate Savings Act as a long-term education savings plan.

"Compound Accreted Value" - An amount equal to the original amount plus an investment return accrued to the date of determination at a semiannual compounding rate which is necessary to produce the yield at maturity indicated on the Official Statement that was issued when the bonds were sold. The "Compound Accreted Value at Maturity" will be equal to \$5,000 or an integral multiple thereof.

"Education Expenses" - Costs incident to enrollment which may reasonably be incurred during an Academic Year, including tuition and fees, room and board, books and supplies, child care expenses, laundry, travel and other personal expenses related to the Student Beneficiary's attendance at the Eligible Institution. These do not include costs incurred in an academic program of divinity for any religious denomination or in a course of study to become a minister, priest, rabbi or other professional person in the field of religion.

"Eligible Institutions" - Those Institutions which are eligible to participate in the Monetary Award Program (MAP) (see 23 Ill. Adm. Code 2735.60, Institutional Eligibility); but do not include any

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educational institutions organized solely for the purpose of religious instruction.

"Qualified Bond Holder" - A holder of a College Savings Bond who uses at least 70 percent of the amount redeemed at maturity to finance Educational Expenses incurred by a designated Student Beneficiary at an Eligible Institution. A Qualified Bond Holder may designate one Student Beneficiary for each bond redeemed. In cases where two individuals jointly own a College Savings Bond, only one Student Beneficiary may be designated. To be designated a "Qualified Bond Holder" under this Part, the individual must furnish documentation demonstrating that he or she has continuously owned the bond(s) for at least the 12 months preceding the date of maturity or, in the event of a bond(s) with an original maturity of less than 12 months, for at least the six months preceding the date of maturity. ~~However, if the bond(s) were acquired during the 12-month period, or six-month period as appropriate, by gift or under the laws of descent and distribution, such holder shall be deemed a~~ Qualified Bond Holder.

"Student Beneficiary" - An individual designated by a Qualified Bond Holder as the recipient of a grant pursuant to this Part and as the beneficiary of at least 70 percent of the bond proceeds paid at maturity. For purposes of this Part, an Applicant may not be designated as the beneficiary of more than \$25,000 worth of bond proceeds in any single academic year.

(Source: Amended at 19 Ill. Reg. 8312, effective JUL 01 1995.)

## Section 2771.30 Program Procedures

## a) Application Procedures

- 1) Applications for a Bonus Incentive Grant (BIG) shall be available from the Illinois Student Assistance Commission (ISAC) and Eligible Institutions.
- 2) A complete application for BIG assistance shall include certifications from: the Qualified Bond Holder(s), the Student Beneficiary and the Registrar of the Eligible Institution at which the Student Beneficiary is Enrolled- on at least a half-time basis.
- 3) A Qualified Bond Holder or a Student Beneficiary may submit a BIG application at any time between August ~~1st~~ and May 30~~9th~~ for a grant spanning that same Academic Year. All grants under this program are subject to sufficient annual appropriations for this program by the General Assembly.
- 4) ISAC may require applicants to provide documentation verifying that the Qualified Bond Holder owned the bonds for the requisite



## ILLINOIS STUDENT ASSISTANCE COMMISSION

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length of time.

- b) Application certifications
- 1) The Qualified Bond Holder(s) shall certify the following for the academic year in which the application is being submitted:
    - A) that the aggregate Compound Accreted Value at maturity of the College Savings Bond(s) was not more than \$25,000;
    - B) that at least 70 percent of the proceeds of the College Savings Bond(s) have been or will be used for Educational Expenses incurred by the Student Beneficiary;
    - C) the name of the Student Beneficiary;
    - D) that no other student has been designated as the Student Beneficiary for the same College Savings Bond; and
    - E) the date on which the bond(s) were issued, the date on which the bond(s) were acquired and the date on which the bond(s) matured.
  - 2) The Student Beneficiaries shall certify the following:
    - A) that their address, Social Security Number and other identifying information is accurate;
    - B) that the Qualified Bond Holder has provided financial assistance, in the amount indicated on the application, for Educational Expenses incurred at an Eligible Institution; that they are enrolled in an academic program that is eligible for BIG assistance; and
    - D) that they will use their BIG proceeds to finance Educational Expenses.
  - 3) The Registrar at the Eligible Institution shall certify the enrollment status of Student Beneficiaries.
  - c) BIG proceeds will be paid to Eligible Institutions; however, they may be remitted directly to the Student Beneficiary if the Eligible Institution designates ISAC as its disbursing agent for this purpose. The dollar value of the BIG shall be determined according to the Table of Grant Amounts (see Appendix A of this Part); provided, however, that:
    - 1) the Compound Accreted Value of the bonds shall not exceed \$25,000 in any given academic year;  
Example: A BIG could not be claimed for more than 5 bonds of \$5,000 Compound Accreted Value each in any given year. Even if 12 bonds of \$5,000 Compound Accreted Value each, or \$60,000 total, had been purchased on behalf of a beneficiary, a BIG could be paid only for the first \$25,000.
    - 2) 70 percent of the Compound Accreted Value of the bonds for which a BIG is being claimed in a given Academic Year academic-year does not exceed the beneficiary's cost of attendance at an Eligible Institution for that year.  
Example: The beneficiary's cost of attending University A is \$14,000. Since \$14,000 is 70 percent of \$20,000, a BIG could not be claimed for bonds with a Compound Accreted Value in excess of \$20,000. Even if 5 bonds of \$5,000 Compound Accreted Value each,

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or \$25,000 total, had been purchased on behalf of the beneficiary, in this case a BIG could be paid only on the first \$20,000.

- e) Both the proceeds of the bond(s) and the BIG assistance must be used by the Student Beneficiary in the Academic Year in which the bond was redeemed or in the Academic Year academic-year immediately following redemption.
- f) Applicants may request that their eligibility for ISAC Gift Assistance ~~gift--assistance~~ be recalculated to exclude up to \$25,000 in accumulated bonds and interest, pursuant to ISAC Appeal Procedures (see 23 Ill. Adm. Code 2700.70). Recalculations will only be performed for those students who complete the required federal needs analysis process.

(Source: Amended at 19 Ill. Reg. 8312, effective JUL 01 1995)

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## Section 2771.APPENDIX A Table of Grant Amounts

GRANT AMOUNT PER \$5000 COMPOUND  
ACCRETED VALUE AT MATURITY

GRANT BOND MATURITY (August 1)	1/88 Bond Sale	10/88 Bond Sale	10/89 Bond Sale	10/90 Bond Sale	10/91 Bond Sale
1991	-	-	\$ 40	-	-
1992	-	-	\$ 60	\$ 40	-
1993	\$100	\$100	\$ 80	\$ 60	\$ 40
1994	\$120	\$120	\$100	\$ 80	\$ 60
1995	\$140	\$140	\$120	\$100	\$ 80
1996	\$160	\$160	\$140	\$120	\$100
1997	\$180	\$180	\$160	\$140	\$120
1998	\$200	\$200	\$180	\$160	\$140
1999	\$220	\$220	\$200	\$180	\$160
2000	\$240	\$240	\$220	\$200	\$180
2001	\$260	\$260	\$240	\$220	\$200
2002	\$280	\$280	\$260	\$240	\$220
2003	\$300	\$300	\$280	\$260	\$240
2004	\$320	\$320	\$300	\$280	\$260
2005	\$340	\$340	\$320	\$300	\$280
2006	\$360	\$360	\$340	\$320	\$300
2007	\$380	\$380	\$360	\$340	\$320
2008	\$400	\$400	\$380	\$360	\$340
2009	-	-	\$400	\$380	\$360

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2010	-	-	\$420	\$400	\$380
2011	-	-	-	\$420	\$400
2012	-	-	-	-	\$420

GRANT AMOUNT PER \$5000 COMPOUND  
ACCRETED VALUE AT MATURITY

GRANT BOND MATURITY (August 1)	10/92 Bond Sale	10/93 Bond Sale	10/94 Bond Sale
1994	\$40	-	-
1995	\$60	\$40	\$15
1996	\$80	\$60	\$40
1997	\$100	\$80	\$60
1998	\$120	\$100	\$80
1999	\$140	\$120	\$100
2000	\$160	\$140	\$120
2001	\$180	\$160	\$140
2002	\$200	\$180	\$160
2003	\$220	\$200	\$180
2004	\$240	\$220	\$200
2005	\$260	\$240	\$220
2006	\$280	\$260	\$240
2007	\$300	\$280	\$260
2008	\$320	\$300	\$280
2009	\$340	\$320	\$300
2010	\$360	\$340	\$320
2011	\$380	\$360	\$340
2012	\$400	\$380	\$360
2013	\$420	\$400	\$380
2014	-	\$420	\$400
2015	-	\$440	\$420
2016	-	-	\$440

\*If no grant amount is shown, there were no bonds sold at that maturity for that particular issue.

(Source: Amended at 19 Ill. Reg. 8312, effective JUL 01 1995)



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1) Heading of the Part: Federal Family Education Loan Program (FFELP)2) Code Citation: 23 Ill. Adm. Code 27203) Section Number: Adopted Action:

2720.6	Amended
2720.10	Amended
2720.20	Amended
2720.25	Amended
2720.30	Amended
2720.40	Amended
2720.41	Amended
2720.42	Amended
2720.50	Amended
2720.55	Amended
2720.70	Amended
2720.90	Amended

4) Statutory Authority: Implementing Sections 80 through 175 of the Higher Education Student Assistance Act [110 ILCS 947/80 through 175]; Title IV, Part B, of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1071 et seq.); and authorized by Section 20(f) of the Higher Education Student Assistance Act [110 ILCS 947/20(f)].

5) Effective Date of Amendments: July 1, 19956) Does this rulemaking contain an automatic repeal date? No7) Does this amendment contain incorporations by reference? No8) Date Filed in Agency's Principal Office: June 5, 19959) Notice(s) of Proposal Published in Illinois Register: January 27, 1995, 19 Ill. Reg. 86110) Has JCAR issued a Statement of Objections to these rule(s)? No

11) Difference(s) between proposed and final version: Changes in this rulemaking were merely minor or technical in nature and were made in response to suggestions from the public, the Administrative Code Division and/or the Joint Committee on Administrative Rules.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes

13) Will these amendments replace an emergency rule currently in effect? No

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14) Are there any amendments pending on this Part? No

15) Summary and Purpose of Amendments: ISAC annually reviews its rules in order to respond to market changes and client suggestions, to implement State and federal statutory changes, and to clarify issues that have arisen during the previous year. In addition to making minor technical and grammatical changes throughout this Part, ISAC adopted the following substantive amendments: In Section 2720.6, the definitions of "co-maker" and "endorser" have been amended to reflect changes embodied in federal regulations at 34 CFR 682.200, Definitions. Additionally, the common PLUS loan form, which must be used for all such loans certified on or after January 1, 1995, eliminated co-makers on PLUS loans. Now, only secondarily liable endorser may be used in conjunction with Federal PLUS loans. Equally liable co-makers, as joint borrowers, can still request consolidation loans. A new definition, "master check," has been added to reflect a new payment mechanism now being utilized in the student loan industry. Whereas individual loan checks for each borrower were previously used, lenders may now send to a school a single check for the proceeds of loans to multiple students at that school, pursuant to federal regulations at 34 CFR 682.200 (see the definition of disbursement) and 682.207 (entitled, Due Diligence in Disbursing a Loan). The final definition change in Section 2720.6 is for SIS, to reflect the fact that no new loans are being originated under this program, which was repealed effective July 1, 1994.

In Section 2720.10(b), the Illinois residency requirement for borrowers which was instituted on January 1, 1992, has now been deleted, returning the rules to the language used prior to that date. ISAC was given the authority to expand or restrict its borrower eligibility requirements in 1987, when P.A. 85-121 deleted from statute the requirement that a student loan borrower be either a resident of Illinois or attending a postsecondary institution in Illinois. At the time the residency limitations were adopted, the item approved by the Commission at its December 9, 1991, meeting stated: "The proposed amendments are appropriate to the environment in which ISAC currently operates and competes. Should that environment change significantly, the rules in question will have to be re-examined. Staff anticipates that such a review will be necessary as early as next year, after action has been taken on comprehensive banking and student aid legislation currently pending at the federal level."

The anticipated federal legislative action has now occurred, rendering the residency requirement unnecessary. In 1991, in light of its limited administrative resources, ISAC was legitimately concerned about its ability to effectively monitor compliance by out-of-state loan program participants with the requirements governing student loan programs. Recent developments at the federal level, however, have alleviated those concerns.

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Specifically, the Higher Education Amendments of 1992 (P.L. 102-325) created an ambitious "Program Integrity Triad," the collective efforts of which are aimed at maintaining the integrity of federal student aid programs and the quality of institutions approved to participate in those programs. The members of the Triad, charged with performing these additional "gatekeeping" and oversight functions, include the U.S. Department of Education, accrediting agencies, and for each state, an officially designated State Postsecondary Review Entity (SPRE). ISAC has been designated by Governor Edgar as the SPRE for Illinois and, as such, will receive annual federal financial support aimed at offsetting the cost of performing its new oversight responsibilities.

With the creation of the Triad, and the enactment of an array of other program integrity measures at the federal level, ISAC believes that adequate safeguards now exist to protect the integrity of its loan programs, making it unnecessary to continue excluding otherwise eligible out-of-state program participants. Even in the absence of these developments, however, recent changes to state and federal banking laws have made it increasingly apparent that, if left in place, the geographic restrictions repealed by these rules would severely diminish ISAC's capacity to serve any of its clients, in-state or otherwise. The Riegle-Neal Interstate Banking and Branching Efficiency Act, signed into law by President Clinton in 1994 (P.L. 103-328), is expected to accelerate the trend among banks to centralize and consolidate; as a result, the student loan program is likely to be increasingly dominated by a smaller number of larger lenders, all operating either nationally or over large, multi-state regions. In order to continue serving these lenders, ISAC must also be able to operate across state lines.

Section 2720.10(e),(f) and (g) have all been amended to reflect a change in federal regulations, which has eliminated specific annual loan limits, and has made schools more responsible for ensuring adherence to aggregate loan limits. The example contained in Section 2720.10(f) was deleted since it was deemed to be representative of only one set of circumstances, and not broad enough to be fully illustrative. ISAC feels that such instruction is better provided to program participants through our training activities and publications. Minor changes have been made to Section 2720.20(a) to use terminology which better reflects all current guaranteed student loan programs, and also to indicate that "lender agreement" is a general term, not the name of the actual form used.

Section 2720.30(ii) has been added to better deal with the unique circumstances of foreign schools participating in ISAC's guaranteed student loan programs. Institutions located outside of the United States often operate quite differently than American schools. Due to the difficulty of evaluating the administrative capability and financial stability of foreign institutions, ISAC will rely on the expertise of the U.S. Department of Education in scrutinizing these applications, as a

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precondition to participation with ISAC. Sections 2720.40(c)(1) and (3) have both been modified to reflect the inclusion of unsubsidized Stafford loans under the lender of last resort requirements. Section 2720.40(f) has been revised to reflect the previously amended definitions of co-makers and endorser with regard to Federal PLUS loans.

Section 2720.41(a) has deleted a reference to the residency requirements which are being eliminated from Section 2720.10(b). Section 2720.42(a)(2) has been revised to clarify that separate loans must be sold simultaneously only when they have been made under the same common application/promissory note. Previously, this section inadvertently applied that loans made from separate promissory notes were also subject to this provision. Section 2720.50(e)(1) has been amended to reference the use of the newly defined master check payment mechanism. Section 2720.50(e)(2) has been clarified to reflect that loan proceeds are disbursed by the lender to the school, not directly to the borrower. Section 2720.50(f) has been revised to incorporate new federal regulations at 34 CFR 682.209(b), which govern the application of any loan prepayments. Section 2720.50(g) has been updated to reflect the appropriate name of the repayment schedule form. A minor change has been made to the wording in Section 2720.55 in order to make clear that additional lending authority for the Federal Consolidation Loan Program may be granted in any amount beyond the original \$5 million allocation, not just in multiples of \$5 million.

Sections 2720.70(b) and (c) have both been clarified to incorporate the proper use of the previously referenced co-makers and endorser in connection with a federal PLUS loan. Section 2720.70(k) has been added to reflect new procedures available to borrowers, enabling them to have an administrative review of their debt prior to a guaranty agency reporting a default to a credit bureau or assessing costs, as required by federal regulations at 34 CFR 682.410. Section 2720.70(l) has been added to reflect the agency's new authority to utilize administrative wage garnishment procedures, in accordance with Section 488A of the Higher Education Act. And finally, Section 2720.90(c) deletes a previous exemption of borrower residency requirements in the transfer of loan guarantees, since residency will no longer be an issue for ISAC guarantees.

16) Information and questions regarding these adopted rules shall be directed to:

Ms. Racquel G. Martinez  
Compliance Counsel  
Illinois Student Assistance Commission  
1755 Lake Cook Road  
Deerfield, IL 60015  
(708) 948-8500



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The full text of the adopted rules begins on the next page.

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TITLE 23: EDUCATION AND CULTURAL RESOURCES

SUBTITLE A: EDUCATION

CHAPTER XIX: ILLINOIS STUDENT ASSISTANCE COMMISSION

## PART 2720

FEDERAL FAMILY EDUCATION LOAN PROGRAM  
(FFELP)

## SUBPART A: FEDERAL LOAN PROGRAMS:

THE FEDERAL STAFFORD LOAN PROGRAM, FEDERAL  
PLUS PROGRAM, FEDERAL SUPPLEMENTAL LOANS FOR STUDENTS (SLS) PROGRAM,  
AND FEDERAL CONSOLIDATION LOAN PROGRAM

Section	Summary and Purpose
2720.5	Definitions
2720.6	Eligibility for ISAC Loan Guarantees
2720.10	Lender Eligibility
2720.20	Educational Institution Lender Eligibility
2720.25	Institutional Eligibility
2720.30	Holder Eligibility
2720.35	Procedures for Obtaining a Guaranteed Loan
2720.40	One-Lender Requirement
2720.41	One-Holder Requirement
2720.42	Procedures for Disbursement and Repayment
2720.50	Federal Consolidation Loan Program
2720.55	Preclaim Assistance
2720.60	Reimbursement Procedures
2720.70	Student Insurance Premium
2720.80	Guarantee Transfers
2720.90	

## SUBPART B: ILLINOIS DESIGNATED ACCOUNT PURCHASE PROGRAM (IDAPP)

Section	Summary and Purpose
2720.1105	IDAPP Eligible Loans
2720.120	IDAPP Eligible Lenders
2720.130	

## SUBPART C: ISAC ORIGINATED LOANS

Section	ISAC Originated Consolidation Loans
2720.200	Illinois Opportunity Loan Program (IOP)
2720.210	Federal Family Education Loans (FFEL)
2720.220	

APPENDIX A Required Activities of Educational Lenders

AUTHORITY: Implementing Sections 80 through 175 of the Higher Education

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Student Assistance Act [110 ILCS 947/80 through 175]; Title IV, Part B, of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1071 et seq.); and authorized by Section 20(f) of the Higher Education Student Assistance Act [110 ILCS 947/20(f)].

SOURCE: Adopted at 3 Ill. Reg. 4, p. 38, effective January 26, 1979; amended at 5 Ill. Reg. 8698, effective August 17, 1981; emergency rule and emergency repealer at 6 Ill. Reg. 7558, 7573, effective June 9, 1982, for a maximum of 150 days; new rules adopted at 6 Ill. Reg. 13799, effective October 25, 1982; old rules repealed at 6 Ill. Reg. 15254, effective December 3, 1982; emergency amendment at 7 Ill. Reg. 9942, effective August 8, 1983, for a maximum of 150 days; codified at 7 Ill. Reg. 13309; amended at 8 Ill. Reg. 876, effective January 9, 1984; amended at 8 Ill. Reg. 7286, effective May 18, 1984; amended at 8 Ill. Reg. 17006, effective September 5, 1984; amended at 9 Ill. Reg. 20796, effective January 1, 1986; amended at 11 Ill. Reg. 3181, effective January 29, 1987; emergency amendment at 11 Ill. Reg. 13669, effective August 5, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 14103, effective August 10, 1987; emergency amendment at 11 Ill. Reg. 18370, effective October 23, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 20989, effective January 1, 1988; amended at 12 Ill. Reg. 6971, effective April 1, 1988; amended at 12 Ill. Reg. 11520, effective July 1, 1988; emergency amendment at 12 Ill. Reg. 15221, effective September 15, 1988, for a maximum of 150 days; emergency expired February 12, 1989; amended at 13 Ill. Reg. 2872, effective February 16, 1989; amended at 13 Ill. Reg. 8630, effective July 1, 1989; transferred from Chapter IX, 23 Ill. Adm. Code 1720 (State Scholarship Commission) to Chapter XIX, 23 Ill. Adm. Code 2720 (Illinois Student Assistance Commission) pursuant to P.A. 86-168, effective July 1, 1989, at 13 Ill. Reg. 17855; emergency amendment at 14 Ill. Reg. 4266, effective March 1, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 10553, effective July 1, 1990; amended at 14 Ill. Reg. 10941, effective July 1, 1990; emergency amendments at 15 Ill. Reg. 18769, effective January 1, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 4060, effective February 28, 1992; amended at 16 Ill. Reg. 11224, effective July 1, 1992; emergency amendment at 17 Ill. Reg. 2055, effective February 1, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 10506, effective July 1, 1993; amended at 18 Ill. Reg. 10254, effective July 1, 1994; emergency amendment at 18 Ill. Reg. 15636, effective October 15, 1994, for a maximum of 150 days; emergency expired March 13, 1995; amended at 19 Ill. Reg. 6215, effective April 15, 1995; amended at 19 Ill. Reg. 8320, effective July 01 1995.

## Section 2720.6 Definitions

"Academic Year" - For the purposes of this Part, is defined at Section 481(d)(2) of the Higher Education Act, as amended, and at 34 CFR 668.2.

"Co-maker" - One of the two individuals who are joint borrowers either on a Federal Consolidation Loan or on a Federal PLUS Program loan that was certified prior to January 1, 1995, and who are equally liable for

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repayment of the loan. (See 34 CFR 682.200.)

"Consolidation" - A federal program which allows borrowers to consolidate a number of loans into one, as authorized by Section 428C of the HEA, as amended.

"Default Status" - The failure of a borrower to make an installment payment when due or to meet terms of the Note, provided this failure persists for 180 days for a loan repayable in monthly installments or 240 days for a loan repayable in less frequent installments under circumstances where ISAC finds it reasonable to conclude the borrower no longer intends to honor the repayment obligation. Such circumstances include, but are not limited to, a refusal to make payment by the borrower.

"Delinquency" - For the purposes of this Part, is defined at 34 CFR 682.411(b).

"Disbursement" - The process of transferring funds from the Lender to the borrower. Educational Institutions participate in the Disbursement process.

"Educational Lender" - An educational institution which meets the Lender eligibility criteria outlined in Section 2720.25.

"Endorser" - A person signet-of-a-promissory-note who is secondarily liable for the repayment of a Federal PLUS loan obligation.

"Federal Regulations" - Regulations promulgated by ED and codified at 34 CFR 668 and 682.

"FFELP" - The acronym for the Federal Family Education Loan Program, as authorized by Section 421 of the Higher Education Act, as amended, including subsidized and unsubsidized Federal Stafford loans, Federal PLUS loans, Federal SLS loans, and Federal Consolidation loans.

"Full-time Student" - For the purposes of this Part, is defined at 34 CFR 682.200.

"Half-time Student" - For the purposes of this Part, is defined at 34 CFR 682.200.

"Holder" - An organization authorized by ED and ISAC to purchase or retain possession of Guaranteed Loans. These organizations operate as commercial and Educational Lenders of secondary markets and may purchase ISAC-Guaranteed Loans from approved Lenders. ISAC's Illinois Designated Account Purchase Program (IDAPP) and the Student Loan Marketing Association (SLMA) are examples of approved Holders.



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"IDAPP" - The acronym for ISAC's Illinois Designated Account Purchase program as authorized by the Education Loan Purchase Program Law (111 Rev. Stat. 1991 ch. 144, pars. 3125 through 3175) (see P.A. 87-9977 effective September 30, 1992) [110 ILCS 947/125 through 170].

"Lender" - Defined by Section 435 of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1085).

"Master Check" - A single check representing the loan proceeds for more than one borrower.

"PLUS" - A Federal program which provides loans to Parents of certain students, as authorized by Section 428B of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1078-2) and Sections 80 through 175 of the Higher Education Student Assistance Act (111 Rev. Stat. 1991 ch. 144, pars. 3680 through 3175) (see P.A. 87-9977 effective September 30, 1992) [110 ILCS 947/80 through 175].

"SLS" - The acronym for the Federal Supplemental Loans for Students Program, as authorized by Section 428A of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1078-1) and Sections 80 through 175 of the Higher Education Student Assistance Act (111 Rev. Stat. 1991 ch. 144, pars. 3680 through 3175) (see P.A. 87-9977 effective September 30, 1992) [110 ILCS 947/80 through 175]. No new SLS Loans have been made for periods of enrollment beginning on or after July 1, 1994. The SLS Program has been merged into the unsubsidized component of the Stafford Loan Program and will no longer exist as a separate program. All conditions and benefits applicable to existing SLS loans will continue for those loans. Also, to the extent that current unsubsidized Stafford Loans have different conditions and benefits than under the merged program, those loans retain those different conditions and benefits. See P.L. 103-66, commonly known as the Omnibus Budget Reconciliation Act of 1993.)

"Stafford" - Subsidized and unsubsidized Federal Stafford Loans to eligible borrowers, as authorized by Sections 427, 428 and 428H of the Higher Education Act, as amended (20 U.S.C.A. 1078) and Sections 80 through 175 of the Higher Education Assistance Act (111 Rev. Stat. 1991 ch. 144, pars. 3680 through 3175) (see P.A. 87-9977 effective September 30, 1992) [110 ILCS 947/80 through 175].

(Source: Amended at 19 Ill. Reg. 8320, effective JUL 01 1995)

## Section 2720.10 Eligibility for ISAC Loan Guarantees

- a) Applicants may apply for a loan guarantee by submitting a common ED-approved application form.
- b) Eligibility requirements for Guaranteed Loans are established by

Federal Regulations (34 CFR 682.201). However, the borrower must be a Resident of the State of Illinois or a parent borrowing on behalf of a student enrolled at an approved institution located in Illinois. For purposes of this Part, a borrower is considered eligible if the Applicant:

- 1) reports an Illinois address as his/her permanent home address and is enrolled on at least a half-time basis at an approved postsecondary institution; or
- 2) is enrolled on at least a half-time basis at an approved postsecondary institution located in Illinois; or
- 3) is a qualified Parent or legal guardian who reports an Illinois address as his/her permanent home address and is borrowing through the Federal PLUS program on behalf of a dependent undergraduate student who is enrolled at least half-time at an approved postsecondary institution; or
- 4) is a qualified parent or legal guardian borrowing through the Federal PLUS program on behalf of a dependent undergraduate student who is enrolled on at least a half-time basis at an approved postsecondary institution located in Illinois; or
- 5) had previously received an ISAC guaranteed loan despite the fact that s/he did not or no longer meets the residency requirements of this subsection.

c) The student must be Enrolled, or accepted for enrollment, at an approved postsecondary Institution which has certified the Applicant as eligible for a Guaranteed Loan.

d) An Applicant shall not be disqualified for a loan guarantee by ISAC if the Lender, the Institution, the student, and the borrower meet the eligibility requirements of Title IV, Part B, of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1071 et seq.), of Federal Regulations and of this Subpart.

e) No loan guarantee shall be issued if such loan would exceed the annual or aggregate amount permitted such borrower for the Academic Year, as specified by Section 428 of the Higher Education Act of 1965, as amended (See 20 U.S.C.A. 1078). Federal Regulations (34 CFR 682.204).

f) The Institution shall compute a recommended loan amount for each Applicant in accordance with Section 425(a)(1)(C) of the Higher Education Act, as amended. No Guaranteed Loan may exceed the Institution's recommended amount.

- 1) When certifying loan eligibility for an Academic Year which will span Academic Levels, the Institution's recommended loan amount shall not exceed the maximum permitted for the Applicant's Academic Level at the time of certification.

Example: A student desires a Federal Stafford Loan for a two-semester period of enrollment beginning August 1993 and concluding May 1994. During the fall 1993 term the student will be a sophomore and during the spring 1994 term the student anticipates attaining the Academic Level of Junior. Prior to the borrower's successful completion of the fall term, the Institution's recommended loan amount shall

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- ~~not exceed the \$3,500 loan permitted sophomore borrowers.~~
- 2) Should a student borrow in excess of the permitted loan maximums, the student becomes ineligible for federal financial assistance for that Academic Year. (See Section 484 of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1091) and 34 CFR 668.7(a)(9).)

g) ~~An applicant who previously received a Federal Stafford or Federal PLUS loan may be eligible for a subsequent loan provided that 211 days have passed from the beginning of the loan term date indicated on the previous loan request to the beginning loan term date on the new loan request. The beginning loan term date must coincide with the start of a term that is published in the school catalog or official class schedule.~~

(Source: Amended at 19 Ill. Reg. 83 201, effective JUL 01 1995.)

## Section 2720.20 Lender Eligibility

a) Lender Agreement

- 1) All approved Lenders must execute an ISAC lender agreement prior to participating in the Federal Family Education Loan Program through ISAC. ~~Stafford, Federal PLUS, Federal SBS or Federal Consolidation loan programs.~~ Lenders wishing to serve as Lenders of last resort are required to sign an additional agreement which includes the provisions of Section 428(j) of the Higher Education Act, as amended.
  - 2) Lenders must have received ED approval prior to executing a ~~lender agreement~~ lender agreement.
  - 3) The lender agreement ~~lender agreement~~ shall include provisions requiring Lenders to:
    - A) Comply with statutes, Federal Regulations, Rules, and procedures; and
    - B) Provide such information as ISAC may request relating to borrower demographics, collection records and other documents ISAC may need to comply with Federal Regulations. (See: Sections 2720.60(a) and 2720.70(c).)
  - 4) Lenders and ISAC may agree to electronically transmit and receive data. ISAC shall provide the Lender with program documentation and reasonable technical assistance related to electronic data exchanges. ISAC and the Lender shall agree that the information and data shall be confidential and shall not be used, disclosed, sold or shared for any purpose other than those directly related to the administration of ISAC's Guaranteed Loan programs.
  - 5) Termination of the lender agreement ~~lender agreement~~ may be made by either the Lender or ISAC with thirty (30) days written notice. Termination shall not affect any obligations incurred prior to the time such termination becomes effective.
- b) Eligible Lenders shall employ an adequate number of qualified persons

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to administer their ~~its~~ responsibilities under the ISAC Rules. In determining whether a Lender employs an adequate number of qualified persons, ISAC considers the number of students aided, the number of applications evaluated and the amount of funds administered.

- c) In addition to the provision of subsection (a), the lender agreement ~~lender agreement~~ for insurance companies approved as Lenders shall require:

- 1) advertising and promotional materials consistent with Section 761 149 of the Illinois Insurance Code ~~§§11-Rev-Stat-1997-ch-737-par-761~~ [215 ILCS 5/149] and 50 Ill. Adm. Code 909; and
- 2) compliance with Sections 421 through 434 ~~Artete-XXVf~~ of the Illinois Insurance Code, which prohibit unfair methods of competition and unfair and deceptive acts and practices ~~§§11-Rev-Stat-1997-ch-737-par-1020-through-1041~~ [215 ILCS 5/421 through 434].

- d) A loan guarantee shall be cancelled if the Lender fails to comply with Federal Regulations, statutes, ISAC Rules, or procedures, provided such failure impairs ISAC's ability to recover the expense of reimbursing the Lender for the defaulted loan.

- e) ISAC conducts compliance reviews to determine if approved Lenders are complying with Federal Regulations, statutes and Rules.

- f) Lenders wishing to participate in ISAC-guaranteed loan programs shall submit an application which shall include, but not be limited to: servicing/secondary market agreements; previous compliance and audit reviews conducted by other guarantors and the Department of Education; documentation relating to the percentage of student loans as compared to other installment loan portfolios; default rates; policy and procedures manuals; promotional materials; a statement relating to previous and anticipated loan volume; and other similar information relating to student loans requested by ISAC to show the Lender's qualifications for participation. Program participation will be determined by an examination of those materials and compliance with federal laws and regulations and state rules and statutes.

(Source: Amended at 19 Ill. Reg. 83 20, effective JUL 01 1995.)

## Section 2720.25 Educational Institution Lender Eligibility

- a) Educational Lenders must meet the eligibility requirements of Institutions as outlined in Section 2720.30, Institutional Eligibility, and must meet the eligibility requirements established for Lenders as outlined in Section 2720.20, Lender Eligibility.
- b) Illinois educational Institutions shall be approved as Lenders by the Commission if approved by ED and if the following requirements are met.

- 1) The specific materials to be provided by an Institution in seeking approval as an eligible Lender are:

A) An audited, certified, and preferably unqualified annual



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financial statement prepared by a firm of certified public accountants (CPA). The statement must cover a period of no less than 12 months and be no more than 12 months old at the time of submission. The CPA firm must express an acceptable opinion on the statement, and the statement shall consist of no less than a balance sheet, a statement of profit and loss, and all attendant notes thereto;

- B) An institutional ~~catalog~~catalogue, and a statement of the Institution's educational costs and refund policies;
  - C) A statement of the Institution's default/delinquency experience as a Lender in the Federal Perkins Loan Program, FFELP, and/or Federal Insured Student Loan (FISL) program (20 U.S.C.A. 1071 et seq.) and a release to permit ISAC to solicit further data from ED or the Institution's service agency, if any, with respect to such records;
  - D) A statement which demonstrates the Institution's administrative ability to comply with all servicing requirements of the program;
  - E) Bank and other credit references and a release to permit ISAC to inquire of these references;
  - F) A statement explaining the source of the Institution's lending capital;
  - G) A statement providing the amount of lending authority sought for the applicable fiscal year and an estimate of the lending volume expected in each of the two succeeding fiscal years; and
  - H) Any other materials which might be requested by ISAC to show the Institution's potential qualifications as a Lender.
- 2) In addition to the above materials, a school which is organized on a for-profit basis will be requested to submit a:
- A) Copy of its student contract;
  - B) Description of its admission/sales staff and their functions;
  - C) Statement of the Institution's drop-out/completion rates;
  - D) Sample of the Institution's advertising materials; and
  - E) Description or copies of student complaints filed with the Institution in the last two years. In addition to these materials, ISAC will secure a Dun and Bradstreet Report on the Institution, a statement from the Better Business Bureau with regard to any consumer complaints, and a statement from the Institution's accrediting association.
- 3) The applications for eligible Educational Lender status in the Programs and the supporting documentation shall be reviewed by ISAC. ISAC staff shall inform the applicant Institution of its proposed recommendations to the Commission prior to the meeting at which action on the application will be taken. The Applicant Institution shall also be informed of the recommendation for its annual lending limit, as well as any additions to the Lender Agreement lender agreement which ISAC feels are prudent in

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individual instances to protect the default record of ISAC. The Institution shall also be informed that if it is not in agreement with any ISAC staff recommendations, it is entitled to representation at the Commission meeting and will be allowed to state its objections. If the Institution is approved by the Commission as an Educational Lender, ISAC will execute a Lender Agreement which will include:

- A) The Institution's agreement to abide by the Rules of ISAC;
  - B) A statement of agreement including, or referring to, the list of required activities of Educational educational ~~educational~~ Lenders labeled as Appendix A of this Part;
  - C) A statement of agreement including, or referring to, the Federal Regulations with respect to loan Disbursements and refund application;
  - D) A statement of agreement including, or referring to, the Federal Regulations definition of "due diligence"; and
  - E) An expiration date of such lending contract which shall not be later than the end of the first full fiscal year following the negotiation of the contract, at which time its renewal shall be considered by ISAC.
- c) A loan guarantee shall be canceled if the Educational Lender fails to comply with Federal Regulations, statutes, ISAC Rules, or procedures, provided such failure impairs ISAC's ability to recover the expense of reimbursing the Educational Lender for the defaulted loan.
- d) ISAC conducts compliance reviews to determine if approved Educational Lenders are complying with Federal Regulations, statutes and Rules.

(Source: Amended at 19 Ill. Reg. 83 20, effective JUL 01 1995)

## Section 2720.30 Institutional Eligibility

- a) Institutional eligibility requirements are specified in Federal Regulations. Eligible postsecondary Institutions include universities, colleges, graduate schools, schools of nursing, business, trade, technical, and vocational schools. Correspondence Institutions/programs are not eligible.
- b) Institutions must have executed a Program Participation Agreement with ED in order to participate in ISAC-Guaranteed Loan Programs. (See: 34 CFR 668.12 et seq.)
- c) When an approved Institution has a change of ownership resulting in a change of control, a change of location, or a change of name as defined by Federal Regulations, the Institution's Program Participation Agreement with ED may be terminated. The Institution may have eligibility reinstated by the execution of a new Program Participation Agreement with ED (See e.g.: 34 CFR 600.30 et seq.) and by the submission and approval of a new application for participation with ISAC.
- d) An Institution may not engage in loan origination activities. This

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prohibition shall not apply if the Institution has an ED-approved Origination Agreement on file with ISAC and the Institution has been approved as an Educational Lender. (See: Section 2720.25 of this Part and 34 CFR 682.601.)

e) Approved Institutions shall provide ISAC with the current enrollment status of students whom the Institution has certified as eligible borrowers. ISAC shall request enrollment data in accordance with a schedule published on an annual basis.

f) Applicant and approved Institutions must demonstrate administrative capability and financial responsibility, as defined by Federal Regulations, in order to begin and to continue participation in ISAC-Guaranteed Loan programs. (See, e.g.: 34 CFR 668.13 et seq.)

g) Institutions wishing to participate in ISAC-Guaranteed Loan programs shall submit an application which shall include, but not be limited to: documentation from the U.S. Department of Education (ED) and the state in which it operates demonstrating authorization to offer educational programs; previous audit and compliance reviews conducted by other guarantors and ED; proof of accreditation; audited financial statements; student catalogs; promotional materials; policy and procedure manuals; documentation relating to default and student withdrawal rates; and other similar information requested by ISAC to show the Institution's ~~institution's~~ qualifications for participation. Participation will be decided by an examination of application materials and a determination of compliance with federal laws and regulation and state statutes and rules. Institutions may appeal an administrative decision denying participation or limiting eligibility in accordance with ISAC appeal procedures. (See 23 Ill. Adm. Code 2700.70.) Institutions denied participation shall be eligible to reapply one year from the date of the initial ISAC letter denying eligibility.

h) Institutions not maintaining the standards of administrative capability or financial responsibility demonstrated in their original applications for participation, or required by Federal Regulations, may be subject to administrative Limitation, Suspension or Termination proceedings. (See 23 Ill. Adm. Code 2790.)

i) A foreign postsecondary educational Institution, located outside of the United States, is eligible to participate in ISAC-guaranteed loan programs provided it produces evidence to ISAC of current eligibility with ED (e.g., Program Participation Agreement, Institutional Eligibility Notice, etc.) or documentation of such eligibility is available directly from ED.

(Source: Amended at 19 Ill. Reg. 83 20, effective JUL 01 1995)

## Section 2720.40 Procedures for Obtaining a Guaranteed Loan

a) Borrowers who are eligible for a loan guarantee in accordance with Section 2720.10 are issued a notice of guarantee/disclosure statement.

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All promissory notes must be in a form approved by ED. No alteration or substitution may be used.

b) All loans are made at the Lender's discretion. When a Lender rejects a borrower's application/promissory note, the Lender shall issue a notice of non-acceptance to the borrower.

c) Lender of last resort requirements

1) An Applicant who is eligible for a subsidized or unsubsidized Stafford loan guarantee pursuant to Section 2720.10 of this Part and who has received two notices of non-acceptance can request that ISAC make a referral to a Lender tender of last resort provided the Applicant:

A) submits a written request for a Lender of last resort loan referral to ISAC, which is accompanied by two notices of non-acceptance issued by ISAC-approved Lenders;?

B) receives loan counseling information specifically designed to benefit an Applicant seeking a Lender of last resort loan; and

C) attends an ISAC-approved Institution.

2) ISAC will refer Applicants to Lenders of last resort or will advise them that they do not meet the eligibility requirements of Section 2720.10 of this Part within 60 days.

3) ISAC will act as a Lender of last resort or will refer the Applicant to the Student Loan Marketing Association if it cannot refer the Applicant to a Lender of last resort willing to make a subsidized or unsubsidized Stafford loan within 60 days.

d) The availability of an ISAC-Guaranteed Loan shall not be conditioned upon the purchase of credit life, life, accident, health, or other forms of insurance.

e) The application/promissory note must be signed in ink. Signature stamps shall not be used.

f) At the Lender's discretion and in accordance with Federal Regulations federal regulations, Endorsers Co-makers may be used for Federal PLUS loans. and Endorsers may be used for SSS-loans.

g) Lenders shall obtain the names and addresses of at least two references from each loan Applicant. Lenders shall submit the reference data to ISAC when requesting ISAC reimbursement pursuant to Section 2720.70.

h) When certifying a borrower eligible for a loan guarantee, the Institution shall provide ISAC a loan disbursement schedule consistent with Section 428G of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1078-7). Should the Institution fail to provide ISAC a disbursement schedule that is consistent with federal law, ISAC shall assign the loan a disbursement schedule that is consistent with Section 428G of the Higher Education Act of 1965, as amended.

(Source: Amended at 19 Ill. Reg. 83 20, effective JUL 01 1995)

## Section 2720.41 One-Lender Requirement



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a) All of a borrower's outstanding ISAC-Guaranteed Loans must be made by the same Lender, subject to the following conditions: **notwithstanding the residency requirements of Section 2720.10(b) of this Part:**

1) ISAC will issue a loan guarantee to a commercial Lender provided that Lender agrees to make all types of Federal Family Education Loans (FFEL) to the borrower which the borrower requests and is eligible to receive, and

A) the loan is the borrower's first ISAC-Guaranteed Loan;

B) the loan is a subsequent loan and the commercial Lender has issued all of the borrower's previous ISAC-Guaranteed Loans; or

C) the loan is a subsequent loan and the commercial Lender holds or has purchased all outstanding ISAC-Guaranteed Loans for that borrower from previous commercial Lender(s), in accordance with Section 2720.42 of this Part.

2) ISAC will issue a loan guarantee to an Educational Lender provided that Lender agrees to make all types of FFEL to the borrower which the borrower requests and is eligible to receive, and

A) the Lender is an educational institution at which the borrower is currently Enrolled, and

B) the borrower has previously made a good faith effort to obtain a loan from a commercial Lender pursuant to Federal Regulations **federal-regulations**. (See 34 CFR 682.601.)

b) The requirements of this Section shall not apply if:

1) the outstanding loans are held by a Lender which has been either declared insolvent by a regulatory agency, has terminated its agreement with ISAC, or has withdrawn from all FFEL programs;

2) the borrower informs ISAC, in writing, that s/he is dissatisfied with the previous Lender's performance and requests that subsequent loans be issued by a different Lender;

3) the borrower is requesting a subsequent loan and the Lender has made a previous ISAC-Guaranteed Loan to that borrower for that loan program with a guarantee date prior to July 1, 1993; or

4) the borrower's outstanding loan(s) was made in accordance with Section 2720.40(c) of this Part, by a Lender of last resort.

(Source: Amended 19 Ill. Reg. 83-20, effective JUL 01 1995)

Section 2720.42 One-Holder Requirement

a) All of a borrower's outstanding ISAC-Guaranteed Loans must be sold by a Lender to the same Holder.

1) If the Lender has sold any of a borrower's previous ISAC-Guaranteed subsidized or unsubsidized Federal Stafford Loan(s) or Federal SLS Loan(s) to an approved Holder, the Lender shall sell all subsequent loans to the same Holder by no later than 90 days from the borrower's last date of attendance or 180

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days following the last disbursement, whichever occurs later; or in the event of untimely notification to the Lender of a student's change in enrollment status, no later than 45 days after the Lender became aware that the student ceased to be enrolled on at least a Half-time basis. (See Section 2720.130(d).)

2) Subsidized Federal Stafford Loans, unsubsidized Federal Stafford Loans and Federal SLS Loans which were made under the same common Application/Promissory Note for loan periods within the same Academic Year must be sold simultaneously.

3) If the Lender has sold the Applicant's previous ISAC-Guaranteed Federal PLUS Loans to an approved Holder, the Lender shall sell each subsequent Federal PLUS Loan for that borrower to the same Holder by no later than 90 days from the last date of attendance or 180 days following the last disbursement, whichever occurs later; or in the case of a late disbursement, the subsequent loan must be sold within 45 days following disbursement.

b) Failure to sell the renewal loan by the deadline shall result in the loss of guarantee.

1) A guarantee may be reinstated if, within 90 days after identifying a loan in violation of subsections (a)(1), (a)(2) or (a)(3) above, the Lender initiates the sale of the loan to the eligible Holder who purchased the Applicant's previous loan(s).

2) Initiation of the sale procedure within 90 days will retroactively reinstate the guarantee to the date the guarantee was lost due to a violation of subsections (a)(1), (a)(2) or (a)(3) above, provided no other violation of Federal Regulation **federal-regulation** or State rule exists.

3) Failure to initiate the sale of the loan within 90 days after identifying the violation will result in a permanent loss of guarantee for that loan. Failure to ultimately sell the loan to the Holder will also result in a permanent loss of guarantee for that loan.

c) The requirements of this Section shall not apply if:

1) the outstanding loans are held by a Holder which has been either declared insolvent by a regulatory agency, has terminated its agreement with ISAC, or has withdrawn from all FFEL programs.

2) the borrower informs ISAC, in writing, that s/he is dissatisfied with the previous Holder's performance and requests that subsequent loans be sold to a different Holder.

(Source: Amended at 19 Ill. Reg. 83-20, effective JUL 01 1995)

Section 2720.50 Procedures for Disbursement and Repayment

a) Disbursement and repayment procedures are specified in Federal Regulations.

b) Prior to Disbursement, the borrower(s) shall execute a completed

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application/promissory note(s) for the principal and interest on the loans. The lender shall retain the original copy of the application/promissory note.

- c) The Lender shall transmit to ED any and all statements and reports necessary to obtain federal interest payments on the borrower(s)' behalf. The Lender shall not collect or attempt to collect from the borrower(s) or ISAC any portion of the interest on the loan which is payable by ED.

- d) Except for loans pursuant to Section 2720.55, the Lender shall not disburse the proceeds of any loan on the borrower(s)' behalf unless and until the Lender shall have received from ISAC evidence of a guarantee. The Lender shall inform ISAC of all disbursement dates through submissions of the Lender manifest/insurance premium invoice system.

- e) Federal Stafford and Federal PLUS loan proceeds shall be transmitted directly to the Institution.

- 1) Federal Stafford loan checks or electronically transmitted funds shall be payable to the student borrower unless the borrower has authorized, in writing, a co-payable loan check. Federal PLUS loan checks shall be co-payable or sent via EFT to the Institution and the parent borrower. Electronically-transferred Federal Stafford or Federal PLUS loan funds transferred either electronically or by Master Check shall be transmitted by the Lender to the Institution along with information identifying the name of each student on whose behalf loan proceeds are being transmitted, and the amount being transmitted on behalf of that student.

- 2) If the proceeds have not been disbursed to the Institution borrower within sixty days after the conclusion of the Term for which the loan was intended, the loan guarantee will be canceled.
- 3) If the borrower has withdrawn from enrollment and Federal Regulations require the Institution to submit a refund to the Lender, either electronically or in the form of a check payable to the Lender on behalf of the borrower, the borrower---the Institution shall provide simultaneous written notice to the student of the refund.

- A) If the Institution fails to issue a timely refund, as defined by Federal Regulations, the Institution shall pay penalty interest.

- B) The penalty interest shall equal the total amount of interest and special allowance generated by the principal value of the refund amount. The penalty interest shall be computed from the date the refund was due until the date the refund was issued.

- C) The penalty interest shall be paid to the Lender or subsequent Holder.

- f) The borrower(s) shall have the right to prepay without penalty the whole or any part of a loan guaranteed hereunder. Unless the borrower requests otherwise, in writing, any prepayment made thereon shall be

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applied in accordance with the provisions of 34 CFR 682.203(b). credited-wholly-to-the-principal

- g) The Lender or Holder shall notify the borrower of the date on which the repayment period begins no later than 120 days after the borrower has left the eligible institution. The Lender or Holder shall send a repayment schedule and--disclosure--statement to a FFELP borrower no less than 30 days nor more than 240 days before the first payment on the loan is due from the borrower.

- h) The Lender or Holder shall notify ISAC of payment in full or prepayment in full by the borrower.

- i) In accordance with Federal Regulations, the Lender or Holder may extend the maturity date of any note. If the Lender or Holder agrees to extend said note, then the borrower(s) must execute a forbearance agreement. A forbearance agreement may be approved for a period of up to one year at a time.

- j) Lenders may exercise administrative forbearances, which do not require the agreement of the borrower, as authorized by Section 428(c)(3)(D) of the Higher Education Act of 1965, as amended, and by Federal Regulations.

- k) Borrowers are entitled to deferments, which extend the maturity date of any note(s), under conditions established by Federal Regulations. The borrower(s) shall be responsible for submitting to the Lender a completed deferment agreement and any corresponding documentation.

- 1) ISAC provides lenders with the forms necessary for servicing their Guaranteed Loan portfolio (e.g., deferment forms, forbearance forms). With advance ISAC approval, lenders may use non-ISAC forms. ISAC shall approve the use of alternative forms provided the alternative form is ED-approved and is compatible with ISAC's data processing requirements.

- m) No note shall be sold or transferred by the Lender except to an ISAC-approved Lender, an ISAC-approved Holder, or ISAC.

(Source: Amended 19 Ill. Reg. 5320, effective JUL 01 1995)

## Section 2720.55 Federal Consolidation Loan Program

- a) ISAC shall guarantee Federal Consolidation loans pursuant to Section 428C of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1078-3).

- b) Lenders may make Federal Consolidation loans provided participation in the consolidation loan program is authorized by the lender agreement Bender-Agreement. (See: Section 2720.20(a).)

- 1) ISAC shall initially authorize a Lender to issue no more than \$5,000,000 in guaranteed Federal Consolidation loans.

- 2) A Lender may receive additional increments-of lending authority provided an ISAC compliance review indicates the Lender is complying with Federal Regulations, statutes and Rules. (See: Section 2720.20(f).)



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- c) All applications and promissory notes shall be in a form approved by ED. Lenders shall report to ISAC when a consolidation loan is made.
- d) Lenders shall request preclaim assistance and reimbursement on consolidation loans in accordance with Sections 2720.60 and 2720.70.
- e) Lenders shall pay the U.S. Department of Education all fees required by Section 428C(f) of the Higher Education Act, as amended, for Consolidation loans made on or after October 1, 1993.

(Source: JUL 01 1995 19 Ill. Reg. 83 20 1, effective

## Section 2720.70 Reimbursement Procedures

- a) If a borrower dies or becomes permanently and totally disabled, the Lender or Holder shall request reimbursement from ISAC within 60 days from the date the Lender or Holder receives a completed request for loan cancellation or forgiveness.
- b) Requests ~~requests~~ for default reimbursement must be submitted to ISAC no earlier than 180 days after the first date of Delinquency and no later than 270 days after the first date of Delinquency. The Lender or Holder shall be reimbursed, in accordance with Federal Regulations and the Higher Education Act of 1965, as amended. In the case of a default on a ~~On~~ Federal PLUS ~~loans~~ loan, the borrower, Co-maker and Endorser ~~all-co-makers~~ must meet the default criteria contained in Federal Regulations.
- c) The Lender or Holder must request ISAC reimbursement for a bankruptcy claim in accordance with Federal Regulations and the Higher Education Act of 1965, as amended. (See, e.g.: 34 CFR 682.402.) The request for reimbursement must be submitted within 30 days after the Lender's or Holder's receipt of notice that collection on the debt is stayed. A copy of the restraining order and the appropriate papers must be included. In the case of a bankruptcy involving a ~~On~~ Federal PLUS ~~loans~~ loan, the borrower, Co-maker and Endorser ~~all-co-makers~~ must meet the bankruptcy criteria contained in Federal Regulations.
- d) Prior to reimbursement, the Lender or Holder must certify compliance with federal due diligence requirements and subsection (h) of this Section.
- e) Prior to reimbursement, the Lender or Holder must have remitted the insurance premium established by Section 2720.80.
- f) The Lender or Holder shall forward to ISAC any payments made by or on behalf of the borrower after default reimbursement and shall advise ISAC of any subsequent information received concerning the borrower. Prior to reimbursement, all original notes or certified, true and exact copies of original notes must be properly endorsed and submitted to ISAC. If the notes have been erroneously stamped "Paid in Full", or lost, the Lender or Holder shall execute a hold harmless agreement with ISAC.
- g) No fee or charge to the borrower, other than the maximum interest rate prescribed by ED and the collection charges outlined in Section

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682.202 (f) and (g) of Federal Regulations, including the student insurance premium, and the federal loan origination fee, shall be contracted for or received by the Lender.

- h) The Lender or Holder shall make a proper collection effort in accordance with acceptable practices of prudent lending Institutions ~~institutions~~ including, but not limited to, the collection activities required by Federal Regulations. (See, e.g.: 34 CFR 682.411.)
- i) ISAC shall collect the outstanding amount on the reimbursed Guaranteed Loan. If the borrower refuses to retire the debt, ISAC shall follow the requirements of Federal Regulations. (See 34 CFR 682.410.)
- j) Should a borrower refuse to retire the debt, ISAC shall direct the State Comptroller to offset any payment from the State Treasurer to the borrower. The funds offset shall be remitted to ISAC and credited against the debt.
- 1) All offsets shall be processed in accordance with 74 Ill. Adm. Code 285.
- 2) ISAC shall not direct an offset if the borrower has maintained a satisfactory repayment record. (See: 23 Ill. Adm. Code 2700.40(a)(1).)
- 3) ISAC shall notify a borrower of the possibility of an offset no less than fifteen days prior to the first offset. ISAC shall not provide additional notice of subsequent offsets for the same debt. Should the borrower dispute the debt, an appeal must be filed within fifteen days of the date of the notice. Appeals will be processed in accordance with 23 Ill. Adm. Code 2700.70.
- If the requested relief is granted, the funds offset shall be returned to the borrower.
- 4) Funds eligible to be offset include, but are not limited to, state income tax refunds and the wages of state employees.
- k) ISAC shall provide a borrower with an opportunity for an administrative review of the legal enforceability or past-due status of the loan obligation after it pays a default claim but before it reports the default to a credit bureau or assesses collection costs against the borrower, in accordance with Federal Regulations (34 CFR 682.410(b)(5)(ii)(C)).
- l) ISAC may garnish the disposable pay of a borrower if the individual is not currently making required payments, in accordance with Section 488A of the Higher Education Act.

(Source: Amended at 19 Ill. Reg. 83 20 1, effective JUL 01 1995)

## Section 2720.90 Guarantee Transfers

- a) ISAC may transfer loan guarantees to or from another guarantor, as specified in Section 428(b)(2)(E) of the Higher Education Act of 1965 (HEA), as amended (20 USC 1078(b)), provided:
- 1) the loan guarantees are insured (see Section 428(b) of the HEA);
- 2) an agreement has been entered into between ISAC and

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- A) the other guaranty agency,  
B) an agent of the guaranty agency, who has been approved by the U.S. Secretary of Education, or  
C) the U.S. Secretary of Education or an agent thereof;  
3) the transfer has been approved by the Holder of the loan.  
b) Notwithstanding any provision of Section 2720.42, regarding all loans being held by one Holder, a loan guarantee may be transferred to ISAC from another guaranty agency.  
c) ~~Notwithstanding any provisions of Section 2720.107 regarding residency requirements for eligible borrowers, a loan guarantee may be transferred to ISAC from another guaranty agency.~~

(Source: Amended at 19 Ill. Reg. 83 20, effective JUL 01 1995 )

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- 1) Heading of the Part: General Provisions  
2) Code Citation: 23 Ill. Adm. Code 2700  
3) Section Number: Adopted Action:  
2700.10 Amended  
2700.20 Amended  
2700.40 Amended  
2700.50 Amended  
4) Statutory Authority: Implementing Sections 80 through 175 of the Higher Education Student Assistance Act [110 ILCS 947/80 through 175]; Title IV of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1070 et seq., as amended by P.L. 102-325); and authorized by Section 20(f) of the Higher Education Student Assistance Act [110 ILCS 947/20(f)].  
5) Effective Date of Rule(s) Amendments: July 1, 1995  
6) Does this rulemaking contain an automatic repeal date? No.  
7) Does this amendment contain incorporations by reference? No.  
8) Date Filed in Agency's Principal Office: June 5, 1995  
9) Notice(s) of Proposal Published in Illinois Register: January 27, 1995, 19 Ill. Reg. 883  
10) Has JCAR issued a Statement of Objections to these rule(s)? No.  
11) Difference(s) between proposed and final version: Changes in this rulemaking were merely minor or technical in nature and were made in response to suggestions from the public, the Administrative Code Division and/or the Joint Committee on Administrative Rules.  
12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes.  
13) Will these amendments replace an emergency rule currently in effect? No.  
14) Are there any amendments pending on this Part? No.  
15) Summary and Purpose of Amendments: ISAC annually reviews its rules in order to respond to market changes and client suggestions, to implement State and federal statutory changes, and to clarify issues that have arisen during the previous year. In addition to making minor technical and grammatical changes throughout this Part, ISAC adopted the following substantive amendments: In Section 2700.20, the term "regulations" has



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been changed to "federal regulations" so its definition is consistent with the definitions contained in other parts of ISAC's administrative rules. The term "institution of record," previously used in connection with situations in which students were concurrently registered at more than one institution, has been defined. This amendment recognizes the increasing importance of concurrent registration as classes offered through telecommunications, also known as distance learning, are rapidly expanding. The definition of "regular school year" has been amended to modify the description of what constitutes a summer term. The former definition inadvertently excluded students enrolled in certain programs from consideration for MAP assistance. Also in Section 2700.20, the definition of "resident," has been clarified to specify that twelve continuous months of residence is required for independent student status and that each month must be one full month, and not a portion of a month.

Several amendments have been incorporated into Section 2700.40(a)(1)(A) to reflect changes embodied in federal regulations at 34 CFR 682.200, which redefine satisfactory repayment arrangements. The new provisions clarify the circumstances under which students whose previous loans were defaulted may regain eligibility for ISAC-guaranteed loans. Section 2700.40(a)(1)(A)(ii) mirrors the federal requirement for reinstatement of Title IV student aid eligibility and 2700.40(a)(1)(A)(iv) corresponds to the reinstatement of guaranteed student loan eligibility after consolidation of previously defaulted loans. A minor change has been made to Section 2700.40(h)(2) in order to clarify the number of eligibility units used by students enrolled on a half-time basis and who are benefitting from ISAC-administered gift assistance programs. And finally, in Section 2700.50(f)(2), the previously mentioned requirement of twelve continuous full months of residency for independent student status has again been referenced to incorporate the amendment into the definition of resident.

16) Information and questions regarding these amendments shall be directed to:

Ms. Raquel G. Martinez  
Compliance Counsel  
Illinois Student Assistance Commission  
1755 Lake Cook Road  
Deerfield, IL 60015  
(708) 948-8500

The full text of the adopted rules begins on the next page:

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TITLE 23: EDUCATION AND CULTURAL RESOURCES

SUBTITLE A: EDUCATION

CHAPTER XIX: ILLINOIS STUDENT ASSISTANCE COMMISSION

PART 2700

GENERAL PROVISIONS

Section	Summary and Purpose
2700.10	Definitions
2700.20	General Institutional Eligibility Requirements
2700.30	General Applicant Eligibility Requirements
2700.40	Determining Applicant Eligibility
2700.50	Electronic Data Exchanges
2700.55	Audits and Investigations
2700.60	Appeal Procedures
2700.70	

**AUTHORITY:** Implementing Sections 80 through 175 of the Higher Education Student Assistance Act [110 ILCS 947/80 through 175]; Title IV of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1070 et seq., as amended by P.L. 102-325); and authorized by Section 20(f) of the Higher Education Student Assistance Act [110 ILCS 947/20(f)].

**SOURCE:** Adopted at 9 Ill. Reg. 20783, effective January 1, 1986; amended at 11 Ill. Reg. 3167, effective January 29, 1987; amended at 11 Ill. Reg. 14099, effective August 10, 1987; amended at 12 Ill. Reg. 11510, effective July 1, 1988; amended at 13 Ill. Reg. 8626, effective July 1, 1989; transferred from Chapter IX, 23 Ill. Adm. Code 1700 (State Scholarship Commission) to Chapter XIX, 23 Ill. Adm. Code 2700 (Illinois Student Assistance Commission) pursuant to P.A. 86-168, effective July 1, 1989, at 13 Ill. Reg. 17854; amended at 14 Ill. Reg. 10538, effective July 1, 1990; amended at 16 Ill. Reg. 11206, effective July 1, 1992; amended at 17 Ill. Reg. 10541, effective July 1, 1993; amended at 18 Ill. Reg. 10282, effective July 1, 1994; amended at 19 Ill. Reg. 8343, effective JUL 01 1995.

## Section 2700.10 Summary and Purpose

- a) The purposes of the Illinois Student Assistance Commission (ISAC) include:
- 1) Improving postsecondary educational opportunities for eligible students through the centralized and administration of Illinois student assistance programs; and
  - 2) Coordinating Illinois student assistance programs with those of the United States Department of Education (ED).
- b) This Part establishes general Rules and definitions that apply to all student assistance programs administered by ISAC, except to the extent that subsequent Parts may qualify these general provisions. Defined terms are indicated by the first letter being capitalized.

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(Source: Amended at 19 Ill. Reg. 8343, effective JUL 01 1995)

## Section 2700.20 Definitions

"Academic Level" - The classification of a student as freshman, sophomore, junior, senior, or graduate student.

"Academic Year" - A twelve month period of time, normally from August or September of any year through August or September of the ensuing year.

"Applicant" - Any individual who requests ISAC consideration for a scholarship, grant, tuition waiver, or guaranteed loan.

"Chargeback" - Payment of tuition by the community college district of a student's residence to the community college district of a student's attendance. ~~{111-Rev7-Stat-1991-CH-122-Par-106-2}~~ [110 ILCS 805/6-2]

"Citizen" - One who, under the Constitution and laws of the United States, is a native-born or naturalized citizen of the United States of America.

"Commission" - The nine member Illinois Student Assistance Commission created by Section 15 of the Higher Education Student Assistance Act. ~~{111-Rev7-Stat-1991-CH-147-Par-3015-1-See-PA-87-997-effective September-37-1992}~~ [110 ILCS 947/15]

"Concurrent Registration" - The simultaneous enrollment at two or more institutions.

"Consortium Agreement" - The written agreement between an institution eligible to participate in any of the programs administered by the Illinois Student Assistance Commission (as defined in Section 2700.30 and subsequent Parts of the ISAC Rules) and another institution whereby the second institution provides all or part of the education program of students enrolled in the eligible institution. ISAC reserves the right, after review of the agreement, to make the final decision regarding the amount, if any, and the destination of final Gift Assistance payment(s).

"Dependent Student" - A scholarship, loan or grant applicant or recipient who is not classified as an Independent Student.

"ED" - The acronym for the United States Department of Education.

"Eligible Noncitizen" - For the purposes of these Rules, eligible

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noncitizen is defined as noncitizens eligible for federal student assistance pursuant to Section 484 of the Higher Education Act of 1965, as amended. (See: 20 U.S.C.A. 1091.)

"Enrolled" - The status of a student who has completed the institution's registration requirements and is attending classes.

"Executive Director" - The chief executive officer of ISAC.

"Federal Regulations" - Refers to regulations promulgated by ED and codified at 34 CFR 600 et seq.

"Foreign Missionary" - An individual who is assigned duty outside of the United States by an organization that engages in education, philanthropic, humanitarian or altruistic works. The missionary organization must be exempt from the payment of federal taxes and must have been engaged in placing Foreign Missionaries for at least five years. Examples of such missionary organizations include, but are not limited to, the following: Peace Corps, Evangelical Alliance Mission, etc.

"Full-time Student" - An individual enrolled for twelve or more credit hours, for either a semester or quarter term.

"Gift Assistance" - Student assistance funds in the form of a scholarship, grant or tuition waiver, including but not limited to, federal, state, institutional and private aid.

"Good Moral Character" - An applicant is of good moral character if the applicant will benefit from postsecondary instruction and is allowed to enroll at an approved postsecondary institution.

"Guaranteed ~~Beans~~ Loan(s)" - Loan assistance through the Federal Family Education Loan Program (FFELP) which includes the subsidized and unsubsidized Federal Stafford Loan, the Federal PLUS Loan, the Federal Supplemental Loans for Students (SLS), and the Federal Consolidation Loan programs.

"Half-time Student" - An individual enrolled for six or more credit hours (but less than twelve credit hours) for either a semester or quarter Term.

"Independent Student" - For the purposes of these Rules, independent student is defined by Section 480 of the Higher Education Act of 1965, as amended by P.L. 102-325. (See: 20 U.S.C.A. 1087vv.) A non-independent student is referred to as a Dependent Student.

"Institution" - Unless otherwise qualified, any secondary or



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postsecondary educational organization which enrolls students who participate in ISAC programs.

"Institution of Record" - The postsecondary Institution at which a student is Enrolled and seeking a degree or certificate. This Institution assumes primary responsibility for certification of eligibility for ISAC-administered programs and for requesting payment from ISAC.

"ISAC" - The acronym for the Illinois Student Assistance Commission: the administrative agency created by Section 15 of the Higher Education Student Assistance Act (Ill. Rev. Stat. 1991, ch. 147, par. 15) (see 5-A-07-9977-effective-September-30-1992) (110 ILCS 947/15) to administer student assistance programs in Illinois.

"Mandatory Fees" - The charges assessed by an institution to each and every Full-time student for each term. Application, graduation, laboratory, breakage and add/drop fees are specifically excluded. For the purposes of these Rules, Tuition is not a Mandatory Fee.

"Parent" - For the purpose purposes of these Rules, "Parent" is defined at 34 CFR 668.2.

"Pell Grant" - A Federal Gift Assistance program administered by ED in accordance with Section 411 of the Higher Education Act of 1965, as amended. (See: 20 U.S.C.A. 1070a et seq.)

"Regular School Year" - An eight to nine month period of time which includes two semester Terms or three quarter Terms. The regular school-year Regular School Year excludes summer Terms. Programs Terms that begin after April 15 and end before August September 16 are considered summer Terms.

"Regulations"---Refers to regulations-promulgated-by-ED--and--codified at-34-CFR-668-et-seq.

"Remedial Courses" - The course work that prepares a student for study at the postsecondary level and must be necessary for the student to pursue the eligible postsecondary program.

"Resident of Illinois" -

A Dependent Student is a Resident of Illinois if the Parent of the dependent-Applicant, who is required by the instructions to complete the Free Application for Federal Student Aid (FAFSA), physically resides within the State of Illinois.

An Independent Student is a Resident of Illinois if the Applicant

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physically resides within the State of Illinois (at the time of application), and has so resided for a period of twelve continuous, full months immediately prior to September 1 of the Academic Year for which assistance is requested.

When an Applicant does not qualify as a Resident of Illinois under the preceding two subsections and the Applicant is a member of the U.S. Armed Forces or a Foreign Missionary, or is the dependent or the spouse of an individual who is a member of the U.S. Armed Forces or a Foreign Missionary, then the Applicant's residency shall be determined in accordance with this subsection.

An Applicant who is a member of the U.S. Armed Forces will be a Resident of Illinois if the Applicant physically resided in Illinois immediately prior to entering the U.S. Armed Forces, returned (or plans to return) to Illinois within six months of the conclusion of enlistment and can demonstrate (pursuant to Section 2700.50(f) and (g)) that his/her domicile was the State of Illinois throughout such enlistment.

An Applicant who is a Foreign Missionary will be a Resident of Illinois if the Applicant physically resided in Illinois for six continuous months immediately prior to entering missionary service, returned (or plans to return) to Illinois within six months of the conclusion of missionary service, and can demonstrate (pursuant to Section 2700.50(f) and (g)) that his/her domicile was the State of Illinois throughout such missionary service.

The dependent-Applicant shall be a Resident of Illinois notwithstanding the Parent(s)' Parent(s) temporary physical absence from Illinois provided the Parent(s) would be a Resident of Illinois under the preceding two subsections.

The spouse-Applicant shall be a Resident of Illinois immediately upon physically occupying a dwelling within the State of Illinois provided the Applicant can demonstrate that his/her absence from the State was the result of residing with the spouse during enlistment or missionary service outside of Illinois and that the spouse-Applicant's domicile continues to be the State of Illinois.

"Rules" - The rules of the ISAC codified at 23 Ill. Adm. Code: Subtitle A, Chapter XIX.

"Satisfactory Academic Progress" - An institutional policy which establishes minimum standards of academic performance. For purposes of ISAC-administered programs, the standards must be at least as

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stringent as those required by ED pursuant to Section 484 of the Higher Education Act of 1965, as amended. (See: 20 U.S.C.A. 1091.)

"Term" - A unit of time for student attendance, including, but not limited to, a quarter or semester.

"Tuition" - The charge for instruction assessed by a postsecondary institution.

"Verification" - Procedures implemented by postsecondary institutions to verify the eligibility of Applicants. The procedures are established by 34 CFR 668 et seq. and by these Rules.

(Source: Amended at 19 Ill. Reg. 8343, effective JUL 01 1995)

## Section 2700.40 General Applicant Eligibility Requirements

a) Except as otherwise provided by this subsection, an Applicant with a defaulted loan Guaranteed Loan or a defaulted Perkins Loan (20 U.S.C.A.1087aa) is not eligible for benefits under ISAC-administered programs.

1) Eligibility for future terms may be reinstated in accordance with the following provisions:

A) Eligibility for ISAC-Guaranteed Loans will be reinstated when:

i) the debt has been paid in full;  
 ii) the borrower has made six consecutive, voluntary full monthly payments that are reasonable and affordable payments based upon the borrower's total financial circumstances, as provided for in Section 428F(b) of the Higher Education Act, as amended, and 34 CFR 682.200 (see the definition of satisfactory repayment arrangement);  
 iii) the borrower's prior defaulted loan(s) has been rehabilitated by making twelve payments in an amount that will allow the debt to be paid in full within ten years, pursuant to Section 428F(a)(1)(A) of the Higher Education Act, as amended; or

iv) the borrower has made three consecutive, voluntary full monthly payments on a ~~arrangement to repay the defaulted loan(s) in terms that are satisfactory to the holder of the defaulted loan(s) and the defaulted loan(s) for the purposes of consolidating that loan(s) under 34 CFR 682.201. with become part of a Consolidation Loan.~~

B) Borrowers are eligible to use subsections (A)(ii) and (A)(iii) above only one time during the entire life of any

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loan guaranteed by ISAC.

C) Eligibility for ISAC-administered Gift Assistance will be reinstated when the Applicant has maintained a satisfactory repayment record for at least six consecutive months or has met the requirements of subsection (a)(1)(A) above. Factors to be considered by ISAC in evaluating the repayment record include: the amount of the debt, the amount of the payments received by ISAC, the employment status of the Applicant, and the frequency of the Applicant's contact with ISAC.

2) An Applicant for Illinois Veteran Grant (IVG) assistance (23 Ill. Adm. Code 2733) shall be permitted one Term of assistance during which a satisfactory repayment record, as defined by subsection (a)(1)(C) above, must be established. If such a repayment record is not established, additional assistance shall be denied until a satisfactory repayment record is established.

b) No Applicant shall receive ISAC-administered assistance if the Applicant owes a refund for: any ISAC-administered Gift Assistance, a Federal Pell Grant, or a Federal Supplemental Educational Opportunity Grant (SEOG) (20 U.S.C.A. 1070(b)).

c) An Applicant shall, upon request, provide documentation to establish and verify eligibility. (See: Section 2700.50.) Failure to supply adequate documentation will result in the denial of student assistance benefits.

d) An Applicant supplying fraudulent data shall be denied assistance and may also be subject to prosecution by the Illinois Attorney General, United States Department of Justice and/or an Illinois State's Attorney.

e) All Applicants must submit their Social Security Number.

f) Recipients who cease to be Residents of Illinois after notification of eligibility may complete the Academic Year with the assistance awarded.

g) Unless otherwise provided, benefits under Gift Assistance programs are subject to the limits of dollars appropriated to ISAC by the Illinois General Assembly and approved by the Governor. Benefits under Gift Assistance programs are generally limited to the Regular School Year. If funding is available, assistance for summer Terms shall be awarded separately.

h) When Gift Assistance eligibility is limited to a specified number of Term payments, the eligibility cap is calculated in accordance with this subsection.

1) For each semester Term of full-time payment benefits, the recipient is assessed six eligibility units. For each quarter Term of full-time payment benefits, the recipient is assessed four eligibility units.

2) For each semester Term of half-time payment benefits, the recipient ~~one-half of the above-eligibility units~~ is assessed three eligibility units. For each quarter Term of half-time payment benefits, the recipient is assessed two eligibility



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## units.

- 3) Sixty eligibility units are the equivalent of payments for ten ~~semester~~ semesters/fifteen quarters of full-time benefits.
- 4) Forty-eight eligibility units are the equivalent of payments for eight ~~semester~~ semesters/twelve quarters of full-time benefits.
- i) An Applicant shall submit Selective Service registration compliance documentation to the postsecondary institution as required by 34 CFR 668.31 et seq.
- j) Except for grants pursuant to 23 Ill. Adm. Code 2730 (Illinois National Guard Grant Program) and 23 Ill. Adm. Code 2733 (Illinois Veteran Grant Program), an Applicant must be maintaining Satisfactory Academic Progress in accordance with the Institution's policy.

(Source: Amended at 19 Ill. Reg. 8343, effective JUL 01 1995)

## Section 2700.50 Determining Applicant Eligibility

- a) The evaluation of Applicant eligibility is the responsibility of both the Institution and ISAC.
- b) No Applicant is announced eligible for assistance by ISAC unless the application establishes prima facie eligibility. ISAC consults with other appropriate state and federal agencies in the process of reviewing application data. Such agencies include, but are not limited to, the U.S. Department of Education (ED), U.S. Internal Revenue Service (IRS), U.S. Immigration and Naturalization Service (INS), Illinois Department of Public Aid, Illinois Department of Revenue, and Illinois Department of Children and Family Services.
- c) When requesting payment for ISAC programs, the postsecondary Institution must certify that the applicants are eligible recipients. If an Institution subsequently determines a student is ineligible for the awarded assistance, the Institution must inform ISAC and submit the appropriate refund.
- d) If an Institution erroneously certifies an Applicant to be eligible, ISAC will recover the erroneous payment from the Institution. Any student who obtained ISAC-administered funds by submitting inaccurate information to an Institution must tender restitution to the Institution to be eligible for ISAC assistance at that Institution.
- e) If an Applicant is selected for Verification in conjunction with federal student assistance, that Applicant shall also be verified for ISAC-administered programs. A selected Applicant must be verified for ISAC programs even if the Applicant is ineligible for federal student assistance.
- f) Because ED Verification procedures do not include procedures for verifying a student as a Resident of Illinois, the following provisions shall be followed by the Institutions.
  - 1) Residency status shall be verified for each Applicant who is selected for Verification and meets one of the following

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## criteria:

- A) the Applicant has changed dependency status and has become an Independent student; or
- B) the Applicant has not been Enrolled in an ISAC-approved MAP Institution or an ISAC-approved Illinois High School (see: Section 2700.30) during the preceding twelve months; or
- C) the Institution has any information which indicates the Applicant may not be a Resident of Illinois.
- 2) One or more of the documents listed below may provide proof that an Applicant (or Parent) is an Illinois Resident, as defined in Section 2700.20. For an Independent Student Applicant, the dates recorded on the documents must indicate the Applicant has resided in Illinois for the relevant twelve continuous, full months.
  - A) A valid state or federal income tax return
  - B) Illinois High School or college transcript
  - C) Illinois Driver's License
  - D) Utility or rent bills in the Applicant's (or Parent's) name
  - E) Illinois Auto Registration card
  - F) Residential lease in the Applicant's (or Parent's) name
  - G) Wage and Tax Statements (IRS Form W-2)
  - H) Statement of benefits history from the Illinois Department of Public Aid
  - I) State of Illinois Identification Card issued by the Secretary of State
  - J) Statement of benefits from the Illinois Department of Employment Security.
- 3) If an Applicant is a Resident of Illinois, but the Institution cannot document this fact in accordance with subsection (f)(2) above, the Applicant or the Institution may verify residency through ISAC's appeal process. (See: Section 2700.70.)
  - g) Institutions may request first Term payment even though Verification is not yet complete. If, after Verification, an ISAC payment adjustment is appropriate, Institutions must submit the appropriate refund. If Verification is not completed within 60 days after the conclusion of the Regular School Year, the Institution shall return the first Term payment to ISAC. For other than the first Term of eligibility in an Academic Year, the Verification process must be completed before the Institution may request payment.
  - h) When an Institution adjusts an Applicant's eligibility pursuant to Title IV, Part F, of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1087kk et seq.), the Institution shall retain documentation which demonstrates the appropriateness of such adjustment.

(Source: Amended at 19 Ill. Reg. 8343, effective JUL 01 1995)

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1) Heading of the Part: Illinois Special Education Teacher Tuition Waiver Program

2) Code Citation: 23 Ill. Adm. Code 2765

3) Section numbers: Adopted Action:

2765.10	New
2765.20	New
2765.30	New
2765.40	New
2765.50	New

4) Statutory Authority: Implementing Section 65.15 of the Higher Education Student Assistance Act [10 ILCS 947/65.15] and authorized by Sections 20(f) and 65.15(a)(2) of the Higher Education Student Assistance Act.

5) Effective Date of Rule(s): July 1, 1995

6) Does this rulemaking contain an automatic repeal date? No

7) Does this rule contain incorporations by reference? No

8) Date Filed in Agency's Principal Office: June 5, 1995

9) Notice(s) of Proposal Published in Illinois Register:

January 27, 1995, 19 Ill. Reg. 1281

10) Has JCAR issued a Statement of Objections to these rule(s)? No

11) Difference(s) between proposed and final version: Most of the changes in this rulemaking were merely minor or technical in nature and were made in response to suggestions from the public, the Administrative Code Division and/or the Joint Committee on Administrative Rules. In addition to technical changes to this Part, ISAC made three substantive changes in response to public comment. First, a definition of "scholar" was added to Section 2765.20, for clarification purposes. Second, the previously proposed full-time enrollment requirement was removed from Sections 2765.30(b)(4) and 2765.50(f). Third, Section 2765.50(e) has been changed so that the tuition waiver can be used first and then proceeds from the Monetary Award Program can be used to cover fee expenses.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes.

13) Will these rules replace an emergency rule currently in effect? No.

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14) Are there any amendments pending on this Part? No.

15) Summary and Purpose of Rules: Public Act 89-0228 transferred administrative responsibility for ten scholarship and grant programs from the Illinois State Board of Education (ISBE) to ISAC. One of these programs was the Illinois Special Education Teacher Tuition Waiver Program, which encourages academically talented students to pursue careers in any area of special education as a public, private or parochial elementary or secondary school teacher in Illinois. These adopted rules govern the administration of the Illinois Special Education Teacher Tuition Waiver Program. These rules set forth the eligibility criteria for applicants, the selection criteria for Special Education Scholars, and the procedures for the awarding of assistance under this program.

16) Information and questions regarding these adopted rules shall be directed to:

Ms. Raquel G. Martinez  
Compliance Counsel  
Illinois Student Assistance Commission  
1755 Lake Cook Road  
Deerfield, IL 60015  
(708) 948-8500

The full text of the adopted rules begins on the next page.



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TITLE 23: EDUCATION AND CULTURAL RESOURCES  
SUBTITLE A: EDUCATION  
CHAPTER XIX: ILLINOIS STUDENT ASSISTANCE COMMISSION

## PART 2765

## ILLINOIS SPECIAL EDUCATION TEACHER TUITION WAIVER PROGRAM

## Section

- 2765.10 Summary and Purpose  
2765.20 Definitions  
2765.30 Scholar Eligibility  
2765.40 Program Procedures  
2765.50 Institutional Procedures

AUTHORITY: Implementing Section 65.15 of the Higher Education Student Assistance Act [110 ILCS 947/65.15] and authorized by Sections 20(f) and 65-15(a)(2) of the Higher Education Student Assistance Act.

SOURCE: Adopted at 19 Ill. Reg. 8354, effective JUL 01 1995.

## Section 2765.10 Summary and Purpose

- a) The Illinois Special Education Teacher Tuition Waiver Program encourages current teachers and academically talented students to pursue careers as Illinois public elementary and secondary Illinois school teachers in any area of Special Education.
- b) This part establishes the Rules which govern the Illinois Special Education Teacher Tuition Waiver Program. Additional Rules and definitions are contained in the General Provisions Part at 23 Ill. Adm. Code 2700. Defined terms are indicated by the first letter being capitalized.

## Section 2765.20 Definitions

"Eligible Institution" - For the purposes of this Part, the University of Illinois, Southern Illinois University and state colleges and universities under the jurisdiction of the Board of Governors and the Board of Regents.

"Fees" - For the purposes of this Part, the Fees that a Special Education Scholar is exempt from paying include: any matriculation, graduation, activity, term or incidental fee. The fees for which the Scholar remains responsible include: multipurpose fees or any other fees such as book rental, service, laboratory, supply, union building, hospital and medical insurance fees and any fees established for the operation and maintenance of buildings, the income of which is pledged to the payment of interest and principal on bonds issued by the

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governing board of any public university or community college.

"Qualified Applicant" - An Applicant who meets the requirements of Section 2765.30(b).

"Scholar" - For the purposes of this Part, a Special Education Scholar.

"Special Education" - A postsecondary educational program designed to teach persons how to meet the needs of all children designated as handicapped, with specific learning disabilities or requiring extraordinary special education services and facilities [105 ILCS 5/14-1.02, 1.02a and 7.02]. These programs prepare persons for meeting the needs of children who exhibit handicapping or exceptional characteristics ranging from very mild to very severe. (See 23 Ill. Adm. Code 226, Special Education.) Such a program prepares a student to teach handicapped children or children with learning disabilities. (See 105 ILCS 5/14-1.02 and 1.03a.)

"Special Education Scholar" - An individual who receives assistance under this Part.

"Tuition Waiver" - An exemption from paying the Tuition and Fees at an Eligible Institution.

## Section 2765.30 Scholar Eligibility

- a) A completed application must be received in ISAC's Deerfield office on or before February 15 immediately preceding the Academic Year for which the scholarship is being requested, in order to receive priority consideration.
- b) In addition to filing a timely application, a Qualified Applicant must:
- 1) be a United States Citizen or an Eligible Noncitizen;
  - 2) be a Resident of Illinois;
  - 3) be an individual who has agreed to take courses that will prepare him/her for the teaching of handicapped children or children with learning disabilities; and
    - A) a high school graduate (or a student scheduled to graduate from high school by the end of the school term in which the award is made) who ranks in the upper half of his or her high school graduating class; or
    - B) a person holding a valid teaching certificate that is not in the discipline of Special Education;
  - 4) be Enrolled, or accepted for enrollment, on a full-time basis as an undergraduate or graduate student seeking certification in any area of Special Education;
  - 5) attend, or plan to attend, an Eligible Institution; and

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- 6) not have received the Illinois Special Education Teacher Tuition Waiver in the past.
- c) Applicants will be notified if they are not Qualified Applicants. A non-Qualified Applicant may appeal a finding of ineligibility in accordance with 23 Ill. Adm. Code 2700.70, Appeal Procedures.
- d) Prior to receiving assistance, the Special Education Scholar must sign a Teaching Agreement/Promissory Note, which must be submitted to ISAC. The Teaching Agreement/Promissory Note shall include the following:
- 1) a pledge on the part of the Scholar to teach in the field of Special Education for two of the five years immediately following graduation or termination of enrollment in any recognized public, private or parochial school in Illinois; and
  - 2) a further stipulation that, if the teaching requirement is not fulfilled, the scholarship converts to a loan and the Special Education Scholar must repay the entire amount of the Tuition Waiver pro-rated to the fraction of the teaching obligation not completed, plus interest at a rate equal to 5% per annum.
- e) A Special Education Scholar shall not be in violation of the teaching agreement, and thus may defer repayment as set forth in subsection (d)(2) of this Section, if the Special Education Scholar:
- 1) serves, for not more than four years, as a member of the United States armed services;
  - 2) is temporarily disabled, for not more than three years, as established by the sworn affidavit of a licensed physician;
  - 3) is pursuing a postgraduate degree and is enrolled on a full-time basis;
  - 4) is seeking and unable to find, for not more than two years, full-time employment as a Special Education teacher, and is able to provide evidence of that fact; or
  - 5) withdraws from a course of study leading to a teacher certification in Special Education but remains Enrolled on a full-time basis in another academic discipline.
- f) A Special Education Scholar shall not be required to pay the amount of the Tuition and Fees waived if s/he becomes permanently totally disabled, as established by the sworn affidavit of a licensed physician (see e.g., 34 CFR 653.42(k)(1)); or if his or her representative provides ISAC with a death certificate or other evidence that the Scholar has died.

## Section 2765.40 Program Procedures

- a) Applications for the Illinois Special Education Teacher Tuition Waiver Program are available from Eligible Institutions; the offices of Regional Superintendents of Education in Illinois; state legislative and federal congressional offices; and ISAC's Springfield, Deerfield and Chicago offices.
- b) ISAC shall accept applications to be a Special Education Scholar in accordance with Section 2765.30 of this Part, Scholar Eligibility.

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- c) If the Applicant section of an application is incomplete, notification will be sent to the Applicant. The Applicant will then have an opportunity to furnish the missing information; however, the application will only be considered for processing as of the date when the student section is complete and received in ISAC's Deerfield office.
- d) On or before March 1 of each year, ISAC, on behalf of principals of public, private and parochial high schools in Illinois, will provide the Regional Superintendents of each county with a roster of the names of all students in their county who are anticipated to be Qualified Applicants.
- e) On or before May 15 of each year, the Regional Superintendents shall certify the eligibility of Qualified Applicants on a roster that shall be returned to ISAC.
- f) ISAC shall award 250 Special Education Teacher Tuition Waivers annually.
- g) A maximum of 40 Tuition Waivers may be awarded annually to Qualified Applicants who hold valid teaching certificates that are not in the discipline of Special Education. (See Section 2765.30(b)(3)(B) of this Part.) If more than forty (40) Applicants qualify under these provisions, a lottery shall be used to select forty (40) Special Education Scholars.
- h) A minimum of 210 Tuition Waivers shall be awarded annually to high school graduates (or students scheduled to graduate) who rank in the upper half of their class. (See Section 2765.30(b)(3)(A) of this Part.) Any of the forty (40) Tuition Waivers not awarded pursuant to subsection (g), above, shall be awarded to this group.
- i) ISAC shall select Scholars, who do not hold valid teaching certificates, from among Qualified Applicants based on the highest Illinois Standard Test Scores. (See 23 Ill. Adm. Code 2760.30 and Appendices A and B.)
- j) A lottery will be used to determine Special Education Scholars if the number of Qualified Applicants sharing the same Illinois Standard Test Score exceeds the number of Tuition Waivers to be awarded.
- k) Notice of eligibility will be sent by July 1 to each Qualified Applicant who is selected to receive a Special Education Teacher Tuition Waiver. The Special Education Scholar is then responsible for providing a copy of the notice of eligibility to the Institution. All other Qualified Applicants will be notified that they were not selected.

## Section 2765.50 Institutional Procedures

- a) Tuition Waivers are available towards credit for any semester/quarter within an Academic Year.
- b) When a Special Education Scholar graduates, withdraws, or otherwise ceases to be Enrolled in a Special Education program, the Institution shall certify to ISAC the total amount of Tuition and Fees that have



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- been waived on behalf of the Special Education Scholar.
- c) A Special Education Scholar shall be exempt from paying Tuition and Fees at an Eligible Institution for up to four calendar years.
  - d) In any Academic Year in which the Special Education Scholar accepts or receives financial assistance through the Paul Douglas Teacher Scholarship Program (23 Ill. Adm. Code 2762), the Minority Teachers of Illinois Scholarship (23 Ill. Adm. Code 2763), or the DeBolt Teacher Shortage Scholarship (23 Ill. Adm. Code 2764), the Scholar shall forfeit his or her eligibility for assistance under this Part.
  - e) If a Scholar is eligible for both a Tuition Waiver and grant assistance under the Monetary Award Program (23 Ill. Adm. Code 2735), the Tuition Waiver must be used first.
  - f) Special Education Scholars must be Enrolled at an Eligible Institution on a full-time basis. However, leaves of absence may be granted by the president of the Eligible Institution, or her or his designee, for the following reasons:
    - 1) earning funds to defray the Scholar's educational expenses;
    - 2) illness of the Scholar or a member of the Scholar's immediate family, as established by the sworn statement of a licensed physician; or
    - 3) military service.
  - g) A Special Education Scholar must complete his or her course of study within six years. However, a leave of absence granted for military service shall not be considered part of the six years within which a Scholar must complete a degree.

## MINORITY TEACHERS OF ILLINOIS (MTI) SCHOLARSHIP PROGRAM

## NOTICE OF ADOPTED AMENDMENT(S)

- 1) Heading of the Part: Minority Teachers of Illinois (MTI) Scholarship Program
- 2) Code Citation: 23 Ill. Adm. Code 2763
- 3) Section Number: Adopted Action:

2763.10	Amended
2763.20	Amended
2763.40	Amended
2763.50	Amended
- 4) Statutory Authority: Implementing Section 50 and authorized by Section 20(f) of the Higher Education Student Assistance Act (110 ILCS 947/50 and 20(f))
- 5) Effective Date of Rule(s) Amendments: July 1, 1995
- 6) Does this rulemaking contain an automatic repeal date? No.
- 7) Does this amendment contain incorporations by reference? No.
- 8) Date Filed in Agency's Principal Office: June 5, 1995
- 9) Notice(s) of Proposal Published in Illinois Register:  
January 27, 1995, 19 Ill. Reg. 894
- 10) Has JCAR issued a Statement of Objections to these rule(s)? No.
- 11) Difference(s) between proposed and final version: The only changes made in this rulemaking were those requested by the Administrative Code Division or were minor and technical in nature.
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes.
- 13) Will these amendments replace an emergency rule currently in effect? No.
- 14) Are there any amendments pending on this Part? No.
- 15) Summary and Purpose of Amendments: ISAC annually reviews its rules in order to respond to market changes and client suggestions, to implement State and federal statutory changes, and to clarify issues that have arisen during the previous year. In addition to making minor technical and grammatical changes throughout this Part, ISAC proposes the following substantive amendments: Section 2763.10(a) and the definition of "Teacher Education Program" in Section 2763.20 have both been modified to add

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courses of study leading to certification as a preschool teacher as permissible programs of study under MTI. This implements a statutory change made by P.A. 87-0997. Throughout Section 2763.40, the term "commitment" has been changed to "requirement" in order to make the terminology consistent with that used for ISAC's other teacher scholarship programs. Section 2763.50(a) has been revised to reflect an improved application procedure. In order to give the student increased control over the timeliness of the submission of his or her application, the application will now be submitted directly to ISAC, with the institution providing a separate certification of eligibility. Previously, the applicant submitted the application to the school which, in turn, forwarded it to ISAC after the eligibility information was certified. The language in Section 2763.50(e) has also been modified to reflect this change, as well as to clarify certain terminology, and to delete an incorrect reference to the manner in which certain budget information is submitted to ISAC. And finally, Section 2763.50(e)(4) has added a reference to the new DeBolt Teacher Shortage Scholarship Program to the list of other teacher scholarships which an MTI recipient may not concurrently receive.

## 16) Information and questions regarding these rules shall be directed to:

Ms. Raquel G. Martinez  
Compliance Counsel  
Illinois Student Assistance Commission  
1755 Lake Cook Road  
Deerfield, IL 60015  
(708) 948-8500

The full text of the adopted rules begins on the next page.

## MINORITY TEACHERS OF ILLINOIS (MTI) SCHOLARSHIP PROGRAM

## NOTICE OF ADOPTED AMENDMENT(S)

TITLE 23: EDUCATION AND CULTURAL RESOURCES

SUBTITLE A: EDUCATION

CHAPTER XIX: ILLINOIS STUDENT ASSISTANCE COMMISSION

PART 2763

MINORITY TEACHERS OF ILLINOIS (MTI) SCHOLARSHIP PROGRAM

Section	Summary and Purpose
2763.10	Definitions
2763.20	Minority Scholar Eligibility
2763.30	Application Procedures
2763.40	Institutional Procedures
2763.50	

**AUTHORITY:** Implementing Section 50 of the Higher Education Student Assistance Act [110 ILCS 947/50] and authorized by Section 20(f) of the Higher Education Student Assistance Act [110 ILCS 947/20(f)].

**SOURCE:** Emergency rules adopted at 15 Ill. Reg. 15621, effective October 11, 1991, for a maximum of 150 days; emergency expired on March 9, 1992; adopted at 16 Ill. Reg. 7048, effective April 21, 1992; emergency amendments adopted at 16 Ill. Reg. 16326, effective September 28, 1992, for a maximum of 150 days; emergency expired on February 25, 1993; emergency amendment at 17 Ill. Reg. 175, effective January 1, 1993, for a maximum of 150 days; emergency expired on June 1, 1993; amended at 17 Ill. Reg. 10585, effective July 1, 1993; amended at 18 Ill. Reg. 10325, effective July 1, 1994; amended at 19 Ill. Reg. 8361, effective JUL 01 1995.

## Section 2763.10 Summary and Purpose

- The Minority Teachers of Illinois Scholarship Program encourages academically talented minority students to pursue careers as teachers at Illinois preschool, elementary and secondary schools. The program also aims to provide minority children with access to a greater number of positive minority role models.
- This Part establishes the rules which govern the Minority Teachers of Illinois Scholarship Program. Additional rules and definitions are contained in the General Provisions Part at 23 Ill. Adm. Code 2700. Defined terms are indicated by the first letter being capitalized. Statutory language is italicized.

(Source: ~~Amended 1995~~ 19 Ill. Reg. 8361, effective )

## Section 2763.20 Definitions

"Approved High School" - means any public high school located in this State; and any high school, located in the State or elsewhere (whether



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designated as a high school, secondary school, academy, preparatory school, or otherwise) which in the judgment of the Superintendent provides a course of instruction at the secondary level, and maintains standards of instruction, substantially equivalent to those of public high schools located in this State (Section 10 of the Higher Education Student Assistance Act (1991-Rev.-Stat.-1991-ch-147-par-3818)-(See P.A.-097-effective-September-30-1992) [110 ILCS 947/10]).

"Cost of Attendance" - defined at Section 472 of the Higher Education Act of 1965, as amended (20 U.S.C.A. 108711).

"Cumulative Grade Point Average" - means the average grade earned throughout a student's educational program. The calculation shall be consistent with the Institution's established policy or practice and shall be the same as that which is used for admission, placement, or other similar purposes.

"Eligible Applicant" - means a minority student who has graduated from high school or has received a General Educational Development Certification and has maintained a cumulative grade point average at the postsecondary level of no less than 2.5 on a 4.0 scale, and who by reason thereof is entitled to apply for scholarships to be awarded under this Section (Section 50(a) of the Higher Education Student Assistance Act).

"Institution of Higher Learning" - means an educational organization located in this State which: provides at least an organized 2 year program of collegiate grade in liberal arts or sciences, or both, directly applicable toward the attainment of a baccalaureate degree, or, beginning with academic year 1972, a program in health education directly applicable toward the attainment of a certificate, diploma, or an associate degree, either is (A) operated by this State, or (B) operated publicly or privately, not for profit, in the judgment of the Commission meets the standards substantially equivalent to those of comparable institutions operated in this State, and if so required by the Commission, uses the State as its primary guarantor of student loans made pursuant to the Higher Education Act of 1965. For otherwise eligible educational organizations which provide academic programs for incarcerated students, the terms "institution of higher learning", "qualified institutions", and "institution" shall specifically exclude academic programs for incarcerated students (Section 10 of the Higher Education Student Assistance Act).

"Minority Scholar" - means an individual who ISAC determined to be eligible to receive an MTI scholarship and who receives or has received assistance under this Part.

"Minority Student" - means a student who is either: Black (a person

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having origins in any of the black racial groups in Africa); Hispanic (a person of Spanish or Portuguese culture with origins in Mexico, South or Central America, or the Caribbean Islands, regardless of race); Asian American (a person with origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, including Pakistan, and the Pacific Islands, including, among others, Hawaii, Melanesia, Micronesia and Polynesia; or Native American (a person who is a member of a federally or state recognized Indian tribe, or whose parents or grandparents have such membership) and to include the native people of Alaska (Section 50(a) of the Higher Education Student Assistance Act).

"Qualified Student" - means a person: who is a resident of this State and a citizen or permanent resident of the United States; who is a minority student, as defined in this Section; who, as an eligible applicant, has made a timely application for a minority teaching scholarship under this Section; who is enrolled on a full time basis at the sophomore level or above until his or her last semester at a qualified Illinois institution of higher learning as an undergraduate student and has not received a baccalaureate degree, except that last semester seniors must enroll only for a minimum of 6 credit hours in order to maintain eligibility under this Section; who is enrolled in a course of study leading to a teacher certification; who maintains a grade point average of no less than 2.5 on a 4.0 scale while enrolled at the postsecondary level; and who continues to advance satisfactorily toward the attainment of a degree (Section 50(a) of the Higher Education Student Assistance Act).

"Scholar" - For the purposes of this Part, a Minority Scholar.

"Teacher Education Program" - means an undergraduate postsecondary course of study which, upon completion, qualifies a student to be certified as a preschool, elementary or secondary school teacher by the Illinois State Board of Education. For the purposes of a student who has completed less than four semesters/six quarters of postsecondary study, this includes a postsecondary course of study which leads to a Teacher Education Program.

(Source: Amended at 19 Ill. Reg. 8361, effective JUL 01 1995)

## Section 2763.40 Application Procedures

- a) Applications for the Minority Teachers of Illinois Scholarship Program are available from qualified Institutions of Higher Learning, state legislative and congressional offices, and ISAC's Springfield, Deerfield and Chicago offices.
- b) ISAC will mail renewal applications to all Qualified Students who

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- received MTI Scholarships during the preceding Academic Year.
- c) A completed Application must be received in ISAC's Deerfield office on or before the August 1 immediately preceding the Academic Year academic-year for which the scholarship is being requested in order to receive priority consideration for a full-year, full-amount award.
- d) If the student section of an application is incomplete, notification will be sent to the Eligible Applicant. The Eligible Applicant will then have an opportunity to furnish the missing information; however, the application will only be considered for processing as of the date when the student section is complete and received by ISAC. If the school section of an application is incomplete, ISAC will notify the Institution directly. When the school submits the missing information ISAC will consider the application filed on the date that it was originally received.
- e) Eligibility notification shall be sent to each Qualified Student who is selected as a Minority Scholar.
- f) Eligible Applicants shall be required to furnish the postsecondary Institution at which they are enrolled with a copy of their high school transcripts, any other documentation verifying high school graduation, or a copy of their General Educational Development Certificates.
- g) During any Academic Year academic-year in which a Minority Scholar receives assistance under this Part, the Minority Scholar shall be required to sign a Teaching Agreement/Promissory Note prior to receipt of any scholarship assistance. The terms of the Teaching Agreement/Promissory Note shall include the following:
- 1) a pledge on the part of the recipient to teach one year for each year of scholarship aid received, or for any portion of a year for which aid was received, under this Part;
  - 2) a stipulation that such teaching requirement commitment will be fulfilled within the 10-year period following the termination of the undergraduate program for which the Minority Scholar received assistance under this Part;
  - 3) a stipulation that such teaching requirement commitment will be fulfilled at a nonprofit Illinois public, private, or parochial preschool, elementary school or secondary school at which no less than 30 percent of the enrolled students are Minority Students, as certified by the Illinois State Board of Education; and
  - 4) a further stipulation that, if the teaching requirement commitment is not fulfilled, the scholarship converts to a loan and the Minority Scholar must repay the entire amount of the scholarship(s) prorated according to the fraction of the teaching obligation not completed, plus interest at a rate equal to that defined by federal regulations and, if applicable, reasonable collection fees.
- h) A Minority Scholar shall not be in violation of the teaching agreement, and thus not be required to commence repayment as set forth in subsection (g)(4) of this Section, if the recipient:

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- 1) enrolls as a full-time graduate student in a course of study related to teaching at a qualified Institution of Higher Learning;
  - 2) serves, for not more than three years, as a member of the United States armed services;
  - 3) is temporarily disabled, for not more than three years, as established by the sworn affidavit of a qualified physician;
  - 4) is seeking and unable to find full-time employment as a teacher at a school that satisfies the criteria set forth in subsection (g)(3) of this Section, and is able to provide evidence of that fact; or
  - 5) ~~becomes permanently totally disabled as established by the sworn affidavit of a qualified physician, or~~  
~~5)6) withdraws from a course of study leading to a teacher certification but remains Enrolled~~ enrolled on a full-time basis in another academic discipline.
- i) A Minority Scholar shall not be required to repay the amount of the scholarship(s) received if s/he becomes permanently totally disabled as established by the sworn affidavit of a qualified physician (see e.g., 34 CFR 653.42(k)(1)), or if his or her representative provides ISAC with a death certificate or other evidence that the scholar has died.
- j) All repayments collected from Minority Scholarship recipients shall be forwarded to the State Comptroller for deposit into the State's General Revenue Fund.
- (Source: Amended at 19 Ill. Reg. 8361, effective JUL 01 1995 )
- Section 2763.50 Institutional Procedures**
- a) The Institution shall submit the certification of eligibility for Qualified Students with the signed ~~Application/Teaching Agreement/Promissory Note--to ISAC on behalf of the Minority Scholar--~~ the submission of the signed Application/Teaching Agreement/Promissory Note--shall represent the Institution's request for payment.
  - b) ISAC shall disburse scholarship funds in two or three installments, depending on the number of Terms financed by the scholarship; except that, multiple disbursements shall not be required in cases where the applicant's eligibility is not determined until the final Term ~~term~~ of the Academic Year for which the scholarship is being awarded or when a student is attending only one semester and the maximum award does not exceed the student's Cost of Attendance.
  - c) Funds shall be remitted by ISAC to Institutions on behalf of Minority Scholars. When requesting payment of scholarship funds, the Institution shall certify to ISAC that the Applicant is a Qualified Student as defined in Section 2763.20 of this Part.
  - d) Scholarship funds are applicable towards up to two semesters/three



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quarters of full-time ~~Full-time~~ study within an Academic Year. Upon receipt of scholarship funds, the Institution shall verify the Scholar's enrollment status. If the Minority Scholar is Enrolled, the Institution may credit the scholarship funds to the recipient's account for expenses then due and payable. The balance of the disbursement shall be released to the Minority Scholar. If the Minority Scholar has withdrawn from enrollment, the Institution shall return the total amount of the scholarship to ISAC.

## e) Scholarship Amount

1) In accordance with this subsection, the Institution at which the Minority Scholar is enrolled shall compute the amount ~~size~~ of the scholarship, and ~~submit~~ ~~-----a-----completed,-----certified Application/Teaching Agreement/Promissory Note~~. The Minority Scholar must have reviewed and signed the ~~Application/Teaching Agreement/Promissory Note~~ prior to the receipt of any scholarship assistance.

2) Minority Teachers of Illinois Scholarships are applicable only toward ~~Tuition tuition~~ and ~~fee~~ fees and room and board charges or commuter allowances, if applicable. The annual scholarship awarded to a Qualified Student must ~~not-exceed~~ be the lesser of:

A) Tuition ~~tuition~~ and fees plus room and board expenses charged by the Institution ~~tas-reported-to-ISAC-pursuant-to-23-ill-Adm-Code-2700-30fe}~~ ~~-----General-Institutional Eligibility-Requirements}; or~~

B) Tuition ~~tuition~~ and fees plus the standard commuter allowance for students living off-campus ~~tas-reported-to-ISAC-pursuant-to-23-ill-Adm-Code-2700-30fe}~~; or

C) a maximum of \$5,000.

3) The total amount of Minority Teachers of Illinois Scholarship assistance awarded to a Scholar in a given ~~academic-year~~ Academic Year, when added to the other financial aid available to the Minority Scholar for that year, cannot exceed the Cost of Attendance.

4) In any Academic Year in which the Minority Scholar accepts financial assistance through the Paul Douglas Teacher Scholarship Program (23 Ill. Adm. Code 2762) or the David A. DeBolt Teacher Shortage Scholarship Program (see 23 Ill. Adm. Code 2764), the Minority Scholar shall not be eligible for scholarship assistance under this Part.

5) A Minority Scholar may receive grant assistance under the Monetary Award Program (23 Ill. Adm. Code 2735) only up to the amount by which the Minority Scholar's Cost of Attendance exceeds the amount of the scholarship.

(Source: Amended at 19 Ill. Reg. 8361, effective JUL 01 1995)

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## NOTICE OF ADOPTED AMENDMENT(S)

1) Heading of the Part: Monetary Award Program (MAP)

2) Code Citation: 23 Ill. Adm. Code 2735

3) Section Number: Adopted Action:

2735.20 Amended  
2735.30 Amended  
2735.70 Amended  
2735.80 Amended

4) Statutory Authority: Implementing Section 35 and authorized by Section 20(f) of the Higher Education Student Assistance Act [110 ILCS 947/35 and 20(f)].

5) Effective Date of Rule(s) Amendments: July 1, 1995

6) Does this rulemaking contain an automatic repeal date? No

7) Does this amendment contain incorporations by reference? No

8) Date Filed in Agency's Principal Office: June 5, 1995

9) Notice(s) of Proposal Published in Illinois Register: January 27, 1995, 19 Ill. Reg. 903

10) Has JCAR issued a Statement of Objections to these rule(s)? No

11) Difference(s) between proposed and final version: Changes in this rulemaking were merely minor or technical in nature and were made in response to suggestions from the public, the Administrative Code Division and/or the Joint Committee on Administrative Rules. Also, Section 2735.30(a) was changed to incorporate previous amendments that were published at 17 Ill. Reg. 10596 and which became effective on 7/1/93.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes

13) Will these amendments replace an emergency rule currently in effect? No

14) Are there any amendments pending on this Part? No

15) Summary and Purpose of Amendments: ISAC annually reviews its rules in order to respond to market changes and client suggestions, to implement State and federal statutory changes, and to clarify issues that have arisen during the previous year. In addition to making minor technical and grammatical changes throughout this Part, ISAC adopted the following substantive amendments: In Section 2735.20(a)(3), we have provided

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further clarification of what is an eligible degree or certificate program by referencing the federal requirements contained in regulations at 34 CFR 668.8. The remaining changes to that section are merely cosmetic. Section 2735.30(g) has been amended to reflect operational changes currently being piloted in an alternative delivery process for MAP. Under this alternative, MAP applicants may receive information about whether or not they are receiving an award and if so, the specific dollar amount of their award, from either their school or from ISAC. Section 2735.70(d) has been amended to reflect changes made to accommodate the increased usage of classes offered through telecommunications, or distance learning. In addition to incorporating the newly defined term "institution of record," which is contained in General Provisions at 23 Ill. Adm. Code 2700.20, language has been changed to allow for the possibility of students attending classes offered by more than two institutions. Also, amendments have been made to Section 2735.70(d)(5) to better reflect the information needed to monitor students who are concurrently registered in classes through multiple institutions. And finally, a minor change has been made to Section 2735.70(e)(1) to clarify the circumstances under which out-of-state/foreign study is permissible under MAP.

16) Information and questions regarding these rules shall be directed to:

Ms. Raquel G. Martinez  
Compliance Counsel  
Illinois Student Assistance Commission  
1755 Lake Cook Road  
Deerfield, IL 60015  
(708) 948-8500

The full text of the adopted rules begins on the next page.

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## NOTICE OF ADOPTED AMENDMENT(S)

TITLE 23: EDUCATION AND CULTURAL RESOURCES

SUBTITLE A: EDUCATION

CHAPTER XIX: ILLINOIS STUDENT ASSISTANCE COMMISSION

PART 2735

MONETARY AWARD PROGRAM (MAP)

Section	Summary and Purpose
2735.10	Applicant Eligibility
2735.20	Application for MAP Grants
2735.30	Determination of Financial Eligibility
2735.40	Institutional Packaging of Gift Assistance
2735.50	Institutional Eligibility
2735.60	Enrollment Requirements
2735.70	Disbursement of MAP Grants
2735.80	Contractual Agreement Requirements
2735.100	Advance Payment Formula
APPENDIX A	

AUTHORITY: Implementing Section 35 and authorized by Section 20(f) of the Higher Education Student Assistance Act [10 ILCS 947/35 and 20(f)].

SOURCE: Adopted at 9 Ill. Reg. 20857, effective January 1, 1986; amended at 11 Ill. Reg. 3225, effective January 29, 1987; amended at 11 Ill. Reg. 14134, effective August 10, 1987; amended at 12 Ill. Reg. 11546, effective July 1, 1988; transferred from Chapter IX, 23 Ill. Adm. Code 1735 (State Scholarship Commission) to Chapter XIX, 23 Ill. Adm. Code 2735 (Illinois Student Assistance Commission) pursuant to P.A. 86-168, effective July 1, 1989, at 13 Ill. Reg. 17864; amended at 14 Ill. Reg. 7242, effective May 1, 1990; amended at 16 Ill. Reg. 11296, effective July 1, 1992; emergency amendment at 16 Ill. Reg. 19237, effective November 23, 1992, for a maximum of 150 days; emergency expired on April 22, 1993; emergency amendment at 17 Ill. Reg. 6672, effective April 15, 1993, for a maximum of 150 days; emergency expired on September 18, 1993; amended at 17 Ill. Reg. 10596, effective July 1, 1993; amended at 17 Ill. Reg. 22576, effective January 1, 1994; amended at 19 Ill. Reg. 8369, effective July 01 1995.

## Section 2735.20 Applicant Eligibility

- a) All MAP grant recipients must be:
- 1) be Citizens or Eligible Noncitizens of the United States, and Residents of Illinois;
  - 2) be Students in good standing in accordance with their Institution's policy of Satisfactory Academic Progress;
  - 3) be Enrolled in an eligible degree or certificate program (34 CFR 668.8) on at least a half-time basis at a MAP-approved postsecondary Institution. (See Section 2735.60-7). A recipient may receive MAP grant payment for less than half-time enrollment provided the recipient was Enrolled on at least a



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half-time basis throughout the Institution's Tuition refund/withdrawal adjustment period (See Section 2735.70(g)). and

A) A recipient may receive a MAP grant payment for less than half-time enrollment provided the recipient was enrolled on at least a half-time basis throughout the institution's tuition refund/withdrawal adjustment period. (See Section 2735.70(g)).

4) B) Effective with terms beginning on or after July 1, 1990, no person who is not be incarcerated, may receive a MAP grant.

b) All recipients must demonstrate financial eligibility as determined from the financial data supplied to the Illinois Student Assistance Commission (ISAC). (See: Section 2735.40.)

c) Eligibility is restricted to undergraduate students.

1) MAP recipients must not have received a baccalaureate degree.

2) Graduate Students are not eligible for MAP assistance. For purposes of this Part, an Institution shall classify as a "Graduate Student" any student who:

A) is enrolled in an academic program or course above the baccalaureate level which is leading to any degree above the baccalaureate level; and

B) is not eligible to receive federal financial assistance (34 CFR 674.2, 675.2, 676.2) as an undergraduate student; and

C) has completed the equivalent of at least three years of Full-time postsecondary study, either prior to entrance into the academic program or as part of the academic program itself.

d) A recipient may receive the equivalent of 10 semesters/15 quarters of Full-time MAP grant payment. (See: 23 Ill. Adm. Code 2700.40(h).) If a recipient has accumulated less than sixty eligibility units, s/he may receive one additional Term of Full-time MAP assistance.

e) Seniors in their last Term of enrollment prior to receiving a baccalaureate degree and Applicants Enrolled in student teaching are classified as Full-time Students for purposes of MAP grant eligibility.

(Source: Amended at 19 Ill. Reg. 8369, effective JUL 01 1995)

## Section 2735.30 Application for MAP Grants

a) An application for a MAP grant must be submitted annually. Applicants may use any one of the forms which the United States Department of Education (ED) designates as an application form for the Pell Grant Program. (See Section 483 of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1070a).)

b) Priority Consideration Dates  
Regular School Year applications must be received before June 1 immediately preceding the Regular School Year for which the

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application is being made from students who had applied for a MAP grant for the previous Regular School Year in order to receive priority consideration for a full year award. Regular School Year applications must be received before October 1 from students who had not applied for a MAP grant the previous Regular School Year in order to receive priority consideration for a full year award.

c) Priority Processing Guidelines

1) Students who file applications will be considered for full or partial year MAP awards based on available funds and the following:

A) Prior to June 1 preceding the Regular School Year for which assistance is being requested, students who had not applied for a MAP award the previous Regular School Year and students who did apply for a MAP award the previous Regular School Year will both be considered for full-year awards;

B) From June 1 until October 1, students who had not applied for a MAP awards the previous Regular School Year will be considered for full year awards; while students who did apply for a MAP award the previous Regular School Year will be considered for second semester or second and third quarter awards only;

C) On or after October 1, and until the date of final suspension of award announcements for that Regular School Year, students who had not applied for a MAP award the previous Regular School Year will be considered for second semester or second and third quarter awards only; while students who did apply for a MAP award the previous Regular School Year will not be considered for a MAP award at all;

2) During the time periods referenced above, awards will be announced concurrently, both to students who had not applied for a MAP award the previous Regular School Year, and to students who did apply for a MAP award during the previous Regular School Year. Award announcements will be made concurrently through the date of suspension of award announcements.

3) If it becomes necessary to suspend the processing of award announcements in order to remain within appropriated funding levels, the suspension will be applied concurrently to students who had not applied for a MAP award for the previous Regular School Year and to students who did apply for a MAP award the previous Regular School Year.

4) Corrections to applications received prior to the final suspension of award announcements will be processed and announced up to two months after the final suspension date or until the completion of the processing cycle, whichever comes first.

d) Students eligible for winter or spring term awards who have missed the June 1 priority date and who are graduating mid-year may request that their winter or spring award be used for fall term.

e) To the extent necessary to administer the program within the limits of the MAP appropriation, the Commission may adjust the priority

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consideration dates and the priority processing guidelines established by this Section.

- f) When an application is incomplete, a notice will be sent to the Applicant. The Applicant then has an opportunity to furnish the missing information; however, depending on processing schedules, the Applicant may be considered only for subsequent Term awards.
- g) ~~ISAC--informs~~ Applicants are informed that they are MAP recipients on the basis of application data supplied to ISAC. All announced MAP recipients are subject to Verification and awards are contingent upon the availability of funds.
- h) The Commission shall annually establish and publicize guidelines for the release of or increase in MAP awards as additional funds become available.

(Source: Amended at 19 Ill. Reg. 83 6 9 1, effective JUL 01 1995)

## Section 2735.70 Enrollment Requirements

- a) It is the responsibility of MAP recipients to gain admission to approved Illinois Institutions. Illinois Institutions are not obligated to admit Monetary Award recipients. Once the recipient is Enrolled and attending classes, the Institution shall receive payments for Tuition and other Mandatory Fees provided by the award. The Institution is obligated to provide Monetary Award recipients the same facilities and instruction, on the same terms, as are provided to other students.

- b) The MAP grant shall not pay for academic programs intended to prepare a student for the General Educational Development (GED) Test or for a high school diploma. (See: e.g., 23 Ill. Adm. Code 215.)

- c) The MAP grant shall not pay for audit courses, credit-by-examination and/or life experience, non-credit course offerings (except qualifying remedial courses), or correspondence courses. Such course work cannot be used to meet the Half-time or Full-time requirement. Remedial courses shall be eligible for MAP payment provided the student has been accepted into an eligible degree/certificate program and is taking the remedial courses as a part of that program. Payment shall not be made for more than the equivalent of one year of remedial course work ~~coursework~~ (i.e., 30 semester hours or 45 quarter hours).

- d) For any Institution which has Concurrent Registration opportunities, the following policy pertains:

- 1) The recipient must indicate his/her Institution of Record record on the MAP application.
- 2) The payment of the Term award by ISAC will require the Institution of Record record to receive MAP payment on behalf of both any other institutions Institution and to the Institution of Record shall distribute the appropriate share of the award to the other institutions Institution(s). Payment by ISAC will not be made to two-institutions more than one Institution.

- 3) The amount paid cannot exceed the maximum Term award for Full-time or Half-time Students at the Institution of Record Record, or the Tuition and Mandatory Fee costs at the Institution of Record Record if the costs are less than the maximum Term award.

- 4) Concurrent Registration is limited to MAP-approved Institutions.
- 5) The recipient's ~~official~~ academic record(s) ~~transcript~~ at the Institution of Record record must document indicate the total number of credit hours for in which the student is Enrolled.

- e) If a recipient's academic program involves out-of-state and/or foreign study, enrollment must be in accordance with the following provisions:

- 1) The recipient must be Enrolled at the MAP-approved Institution, and the out-of-state/foreign study must be applicable to the student's degree or certificate program at the student's Institution of Record. ~~in-conjunction-with-the--approved~~ institution's-curriculum
- 2) The MAP-approved Institution must record the course credits on the official academic transcript as institutionally earned credit and not as transfer credit.

- 3) The recipient must be Enrolled full-time ~~Full-time~~ and must be charged Tuition and fees at least equal to Tuition and Mandatory Fees charged all students.

- 4) An Institution shall not request more than two semesters/three quarters of MAP assistance for any one recipient.

- f) If an announced recipient's credit hour enrollment decreases, the Institution shall only request payment up to the amount of actual expenses incurred.

- g) If an Applicant withdraws from enrollment after the expiration of the Tuition refund/withdrawal adjustment period, the Applicant shall receive MAP grant payment for costs incurred up to the Term award provided the Institution's Tuition refund policy indicates the Applicant has incurred charges in the amount of the claim.

- h) Eligibility units are accumulated by a recipient whenever MAP funds are disbursed on behalf of the recipient. (See: 23 Ill. Adm. Code 2700.40(h).)

(Source: Amended at 19 Ill. Reg. 83 6 9 1, effective JUL 01 1995)

## Section 2735.80 Disbursement of MAP Grants

- a) Upon receipt of a payment request from the Institution of Record, ISAC remits MAP grant funds to the Institution of Record on behalf of the recipient. The Institution of Record shall credit these funds to the recipient's account.

- b) MAP grants are divided into two semester or three quarter regular Term payments and are paid directly to the approved Institution of Record which certifies to ISAC that the Applicant is an eligible recipient.

- 1) ISAC will annually establish priority claim dates for the return



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of payment request lists and inform schools of the required priority dates.

- 2) Late return of payment request lists will result in delayed processing of payments. Payment requests are processed in the sequence of receipt by ISAC and as funds are available.
- 3) Under no circumstances are Institutions to return their payment request lists until after the second week of classes for the Term for which they are requesting payment.

c) MAP grant payment is subject to the limits of dollars appropriated to the ISAC by the General Assembly.

d) Institutional Processing of Payments

- 1) Within thirty days of receiving payment of any MAP funds claimed or advanced pursuant to this Section, the Institution shall credit the MAP funds against the recipients' Tuition and Mandatory Fee charges for the appropriate Term.

- 2) Following receipt of payment for the Term, Institutions are required to review payments received through the ISAC Monetary Award Program. Any payments received by the Institution that are determined in the review to be refunds payable to ISAC are to be processed and returned to ISAC no later than 60 days following the end of the academic Term. Refunds may be caused by billing errors, retroactive withdrawals, and other miscellaneous reasons authorized by these Rules. Should the payment arrive after the end of the Term, the Institution will have 30 days following receipt of payment to complete the review process and return any refunds due.

- 3) Award payments made in the name of one recipient cannot be applied to another recipient at the same Institution. A refund of the payment made must be submitted to ISAC, and a supplemental request for payment must be processed for the proper recipient.

- 4) To provide sufficient time for processing and vouchering through the State Comptroller's Office in Springfield, all payment requests must be received by ISAC no later than September 1 due to the State's fiscal year lapse period ending on September 30.

- 5) Payment requests received after September 1 for the prior Academic Year will be processed as time and available funds permit; however, final action may require Institutions to go to the Illinois Court of Claims to obtain payment for approved claims. (See: The Court of Claims Act (411--Rev--Stat--1997 ch--977--par--439--17--et--seq--7[705 ILCS 505]).

- 6) If the Institution does not submit refunds as required by this Section, ISAC will deduct outstanding refunds from subsequent institutional payment requests.

e) Advance Payment Option

- 1) MAP-approved Institutions may request consideration for the advance payment option. To be eligible, the Institution must have received MAP payments for each of the last five Academic Years, and ISAC must have completed an audit of the Institution's performance during the aforementioned Academic Years.

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Institutions with provisional eligibility shall not receive advance payments. (See: 23 Ill. Adm. Code 2700.30(i)(5).)

- 2) Subject to the availability of funds, payments are advanced on a Term-by-Term basis. Advance payments are made in an amount not to exceed seventy-five percent of a term's announced recipients, adjusted for attrition as determined by subsection (3)(B). The formula by which ISAC computes an Institution's advance payment is illustrated in Appendix A of this Part.

- 3) For purposes of computing an Institution's advance payment, ISAC uses the lowest retention rate resulting from the following three formulae:
  - A) Dollar value of the previous fiscal year's claimed awards divided by the dollar value of the previous fiscal year's announced awards;
  - B) Number of claimed awards for the previous fiscal year divided by the number of awards announced during the previous fiscal year;
  - C) Using the formula in subsection (e)(3)(B) above, compute the retention rate for the previous five fiscal years. Add the five retention rates and divide by five to produce the five year average retention rate.

- 4) Requests for advance payment shall be submitted by June 1 ~~1st~~ with the annual tuition and fee charges (see 23 Ill. Adm. Code 2700.30(e)). The balance of payment due for the current Term will be paid to the Institution after ISAC receives a payment request.

- 5) If an advance payment Advance-Payment received by an Institution exceeds the total grant payments for which that Institution's students are eligible, the Institution shall submit the appropriate refund to ISAC prior to the end of the Academic Year.

(Source: Amended at 19 Ill. Reg. 83 6 9, effective JUL 0 1 1995)

## ILLINOIS STUDENT ASSISTANCE COMMISSION

## NOTICE OF ADOPTED AMENDMENT(S)

1) Heading of the Part: Paul Douglas Teacher Scholarship Program

2) Code Citation: 23 Ill. Adm. Code 2762

3) Section Number: Adopted Action:

2762.20

Amended

2762.30

Amended

2762.40

Amended

4) Statutory Authority: Implementing and authorized by Section 521 et seq. of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1111 et seq.), and Section 20 (b) and (f) of the Higher Education Student Assistance Act [110 ILCS 947/20(b) and (f)].

5) Effective Date of Rule(s) Amendments: July 1, 1995

6) Does this rulemaking contain an automatic repeal date? No.

7) Does this amendment contain incorporations by reference? No.

8) Date Filed in Agency's Principal Office: June 5, 1995

9) Notice(s) of Proposal Published in Illinois Register: January 27, 1995, 19 Ill. Reg. 912

10) Has JCAR issued a Statement of Objections to these rule(s)? No.

11) Difference(s) between proposed and final version: Changes in this rulemaking were merely minor or technical in nature and were made in response to suggestions from the public, the Administrative Code Division and/or the Joint Committee on Administrative Rules. Also, a definition of "Douglas Scholar" was added to Section 2762.20, for clarification purposes.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes.

13) Will these amendments replace an emergency rule currently in effect? No.

14) Are there any amendments pending on this Part? No.

15) Summary and Purpose of Amendments: ISAC annually reviews its rules in order to respond to market changes and client suggestions, to implement State and federal statutory changes, and to clarify issues that have arisen during the previous year. In addition to making minor technical and grammatical changes throughout this Part, ISAC adopted the following

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substantive amendments: Section 2762.30(b)(2) has been amended to include a minor change in terminology requested by the U.S. Department of Education (ED), as well as to clarify that a student having qualified by virtue of having a satisfactory GED score need not be a high school graduate. Section 2762.30(b)(3)(A)(iii) has been modified to include clarifying language requested by ED as well. Section 2762.30(d)(2)(F) has been revised to include students from low-income families as a specific new subtype of students from disadvantaged backgrounds. Language has been added to Section 2762.40(f)(3) to clarify that when the student's total federal Title IV assistance, when added to a Paul Douglas Teacher Scholarship, exceeds the student's cost of attendance, the Paul Douglas Teacher Scholarship may not be reduced. Section 2762.40(f)(4) adds the new David A. DeBolt Teacher Shortage Scholarship (which incorporates the former Mathematics or Science Teacher Scholarship Program) to the list of other teacher scholarships which Paul Douglas Teacher Scholarship recipients may not concurrently receive.

16) Information and questions regarding these rules shall be directed to:

Ms. Raquel G. Martinez  
Compliance Counsel  
Illinois Student Assistance Commission  
1755 Lake Cook Road  
Deerfield, IL 60015  
(708) 948-8500

The full text of the adopted rules begins on the next page.



## ILLINOIS STUDENT ASSISTANCE COMMISSION

## NOTICE OF ADOPTED AMENDMENT(S)

TITLE 23: EDUCATION AND CULTURAL RESOURCES

SUBTITLE A: EDUCATION

CHAPTER XIX: ILLINOIS STUDENT ASSISTANCE COMMISSION

PART 2762

PAUL DOUGLAS TEACHER SCHOLARSHIP PROGRAM

Section 2762.10	Summary and Purpose
2762.20	Definitions
2762.30	Scholar Eligibility
2762.40	Program Procedures

**AUTHORITY:** Implementing and authorized by Section 521 et seq. of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1111 et seq.), and Section 20(b) and (f) of the Higher Education Student Assistance Act [110 ILCS 947/20(b) and (f)].

**SOURCE:** Emergency Rule adopted at 10 Ill. Reg. 12690, effective July 18, 1986, for a maximum of 150 days; adopted 11 Ill. Reg. 3159, effective January 29, 1987; amended at 12 Ill. Reg. 11559, effective July 1, 1988; amended at 13 Ill. Reg. 8650, effective July 1, 1989; transferred from Chapter IX, 23 Ill. Adm. Code 1762 (State Scholarship Commission) to Chapter XIX, 23 Ill. Adm. Code 2762 (Illinois Student Assistance Commission) pursuant to P.A. 86-168, effective July 1, 1989, at 13 Ill. Reg. 17865; amended at 16 Ill. Reg. 11313, effective July 1, 1992; amended at 17 Ill. Reg. 10611, effective July 1, 1993; amended at 18 Ill. Reg. 10333, effective July 1, 1994; amended at 19 Ill. Reg. 8378, effective JUL 01 1995.

## Section 2762.20 Definitions

"Federal Regulations Regulation" - Regulations promulgated by the United States Department of Education (ED) and codified at 34 CFR 653.

"Douglas Scholar" - For the purposes of this Part, a Scholar.

"Qualified Applicant" - An Applicant who meets the requirements of Section 2762.30(b).

"Scholar" - An individual who has received scholarship assistance under this Part.

"Teacher Education Program" - An undergraduate postsecondary course of study which, upon completion, qualifies a student to be certified as a pre-school, elementary or secondary teacher by a state board of education or its equivalent (including the Illinois State Board of Education). For a student who has completed less than four semesters/six quarters of postsecondary study, this includes a

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postsecondary course of study which leads to a Teacher Education Program.

(Source: Amended at 19 Ill. Reg. 8378, effective JUL 01 1995)

## Section 2762.30 Scholar Eligibility

a) ISAC shall accept applications to be a Paul Douglas Teacher Scholar in accordance with Section 2762.40, Program Procedures.

b) From among the timely Applicants, ISAC shall identify the Qualified Applicants. A "Qualified Applicant" is defined as an individual who meets the requirements of this subsection.

1) A Qualified Applicant must be a United States Citizen or an Eligible Noncitizen, and a Resident of Illinois.

2) A Qualified Applicant must be a high school graduate, its equivalent, or a student scheduled to graduate from high school by the end of the secondary school term year in which the award is made, who:

A) graduated or will graduate in the top ten percent of his/her graduating class; or

B) received a General Educational Development (GED) test score recognized by the General Educational Development Testing Service as the equivalent to ranking in the top ten percent of the United States' high school graduates.

3) A Qualified Applicant must be Enrolled, or accepted for enrollment, as an undergraduate or graduate student seeking initial certification in a Teacher Education Program.

A) The Applicant must be:

i) be Enrolled or accepted for enrollment on a full-time basis;

ii) be Enrolled in the last academic term before graduation or engaged in student teaching if enrolled less than full-time; and

iii) maintain satisfactory progress toward a degree, or, if the student already has a degree, toward teacher certification, in accordance with the Institution's Satisfactory Academic Progress Policy.

B) Enrollment must be with a postsecondary Institution that is approved by the U.S. Department of Education to participate in federal student assistance programs. (See, e.g., 34 CFR 600.10, 600.20, 668.12.)

C) Applicants will be notified whether they are Qualified Applicants. A non-qualified applicant may appeal in accordance with 23 Ill. Adm. Code 2700.70, Appeal Procedures.

d) Recipients shall be selected from among the Qualified Applicants on the basis of the following criteria:

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- 1) Postsecondary Academic Level. Awards will be made first to renewal Scholars, then to all graduate students and seniors, then to all juniors, then to all sophomores, and then to all freshmen.
- 2) Special Consideration. If there are insufficient funds to award scholarships to all Qualified Applicants, ISAC shall give special consideration to Qualified Applicants who are within the same academic level and who:
  - A) intend to teach or provide related services to students with disabilities;
  - B) intend to teach limited English proficient students;
  - C) intend to teach preschool age children;
  - D) intend to teach in schools servicing inner city or rural or geographically isolated areas;
  - E) intend to teach in curricular areas or geographic areas where there are demonstrated shortages of qualified teachers; or
  - F) are from disadvantaged backgrounds, including students from low-income families; racial and ethnic minorities; individuals with disabilities; and students who are underrepresented in the teaching profession or in the curricular areas in which they are preparing to teach.
- 3) Shortage of Teachers. If there are insufficient funds to award scholarships to all Qualified Applicants within a given Academic Level who are entitled to special consideration, awards will be made first to all Applicants Enrolled in an academic discipline in which Illinois has a shortage of teachers, as determined annually by the Illinois State Board of Education. (See: 23 Ill. Adm. Code 54. Subpart D.) Funds will next be awarded to Applicants at the same Academic Level in nonshortage disciplines.
- 4) The Expected Family Contribution (EFC) derived from Federal Methodology. If funds are insufficient to make awards to all Applicants who are entitled to special consideration, to all Applicants in shortage disciplines or to all Applicants in non-shortage disciplines, within an Academic Level, Applicants will be ranked in order of the Applicant's EFC, from lowest to highest. (See: Section 2762.40(b); Title IV, Part F of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1087kk).) Awards will be made within the relevant group in order of increasing EFC. Those Applicants who did not apply for federal student financial aid, and therefore do not have an EFC, are eligible to receive this scholarship but will be ranked last in their relevant group.
- e) A Scholar shall receive a scholarship renewal provided the Scholar continues to meet the requirements of subsections (b)(1) and (3) of this Section. No Scholar may receive more than eight semesters/twelve quarters of scholarship assistance. A Scholar shall not receive a scholarship renewal if the Scholar remains at the same academic level for more than two years.

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- f) The total number of Scholars selected is contingent upon the available funds and the number of scholarship renewals. All scholarships and scholarship renewals are contingent upon sufficient appropriation.

(Source: Amended at 19 Ill. Reg. 8378, effective JUL 01 1995)

## Section 2762.40 Program Procedures

- a) ISAC Applications applications for the Paul Douglas Teacher Scholarship Program are available for distribution to students from: approved High Schools in Illinois; offices of Congressional Representatives from the State of Illinois; offices of ISAC in Springfield, Chicago, and Deerfield; and postsecondary Institutions throughout Illinois.
- b) A completed application must be received in ISAC's Deerfield office on or before August 1 preceding the Academic Year for which the scholarship is being requested in order to receive priority consideration.
  - 1) All Applicants who had not previously been designated as Scholars should also apply for federal student financial aid to determine EFC for the purpose of determining their rank within their relevant group. (See: 20 U.S.C.A. 1070a.)
  - 2) First-time Applicants must also provide their postsecondary Institution a copy of their high school transcripts, any other documentation which verifies rank in class upon high school graduation, or documentation showing their GED test scores. The Institution shall certify to ISAC whether the Applicant is a Qualified Applicant as defined at Section 2762.30(b).
  - c) A congratulatory letter shall be sent to each Qualified Applicant who is selected as a Scholar. A listing of Scholars shall be made available to Institutions, members of Congress, and to the media.
  - d) Renewal applications are mailed annually to eligible Scholars and must be submitted to ISAC on or before August 1 preceding the Academic Year for which the scholarship is being requested in order to receive priority consideration.
  - e) Prior to receiving scholarship assistance for any Academic Year, the Scholar must sign a Teaching Agreement/Promissory Note that is submitted to ISAC.
    - 1) The Teaching Agreement/Promissory Note shall require the Scholar to either:
      - A) fulfill the teaching requirements within ten years after completing the postsecondary education degree program for which the scholarship was awarded, or
      - B) repay all or part of the scholarship, plus interest, as provided by Federal Regulations. (See: 34 CFR 653.42(c)(1).) The teaching requirement is prorated based



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upon whether the student received the scholarship for a semester or quarter rather than a full Academic academic Year year.

## 2) The Teaching Agreement/Promissory Note shall include:

- A) a stipulation that the Scholar teach on a full-time basis for a period of not less than two years, for each year of assistance received, in a public or private nonprofit preschool, elementary, or secondary school, or
- B) a stipulation that the Scholar teach, on a full-time basis, children with disabilities or children with limited English proficiency in a private non-profit school, and
- C) a stipulation that teaching time shall be reduced to one-half if performed in a geographic area or an academic discipline certified as a "teacher shortage area" by the U.S. Secretary of Education.

## f) Scholarship Amount

- 1) In accordance with this subsection, the Scholar's postsecondary Institution shall compute the amount of the scholarship and shall submit a request form. The Scholar must have reviewed and signed the Payment Request Form.

- 2) Except as otherwise provided in this subsection, scholarships shall be in the amount of \$5,000 if the student is enrolled for the full Academic Year. The maximum scholarship for one semester is \$2,500; the maximum scholarship for one quarter is \$1,666.67.

- 3) If a Paul Douglas Teacher Scholarship, when added to the amount the Scholar is to receive for the same Academic Year under Title IV of the Higher Education Act of 1965, as amended (20 U.S.C.A. 1070 et seq.), would exceed the Scholar's cost of attendance, as defined at Section 472 of the Higher Education Act of 1965 (20 U.S.C.A. 108711), as amended, the Institution shall take the receipt of the scholarship into account in determining the student's eligibility for other federal financial aid programs. A Paul Douglas Teacher Scholarship shall not be reduced because of the receipt of other federal student assistance.

- 4) In any Academic Year in which the Scholar accepts financial assistance through the DeBolt Teacher Shortage Scholarship Program (see: 23 Ill. Adm. Code 2764), the Mathematics-or-Science Teacher---Scholarship---Program---(See:---23---Ill---Adm---Code 54---Fellowship---Grant---and---Scholarship---Programs) or the Minority Teachers of Illinois Scholarship Program (see: 23 Ill. Adm. Code 2763), the Scholar shall not be eligible for scholarship assistance under this Part.

- 5) A Scholar may receive grant assistance under the Monetary Award Program (23 Ill. Adm. Code 2735) only up to the amount by which the Scholar's cost of attendance exceeds the amount of the scholarship.

- g) Scholarship funds are applicable towards two semesters/three quarters of Full-time study within an Academic Year. Upon receipt of

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scholarship funds, the Institution shall verify that the Scholar continues to be Enrolled. The Institution may then credit scholarship funds to the recipient's account for expenses then due and payable. The balance of the scholarship funds shall be released to the Scholar. If the Scholar withdraws from enrollment, the Institution shall return the amount of the scholarship to ISAC for the semester(s) or quarter(s) not attended.

- h) A Scholar will be entitled to defer payments due, as outlined in subsection (e)(1)(B) of this Section, during any period in which the recipient meets the conditions outlined in Section 528 of the Higher Education Act, as amended or applicable federal regulations (see: 34 CFR 653.62(g)).

- i) A Scholar shall be excused from repayment, for any scholarship assistance received under this Part, if the recipient becomes permanently totally disabled as established by the sworn affidavit of a qualified physician or if his or her representative provides ISAC with a death certificate or other evidence that the Scholar has died.

- j) Scholars and Applicants may appeal administrative decisions made pursuant to this Part in accordance with ISAC appeal procedures (see: See 23 Ill. Adm. Code 2700.70).

(Source: Amended at 19 Ill. Reg.

JUL 01 1995)

83 ' 8 ' , effective

## ILLINOIS STUDENT ASSISTANCE COMMISSION

## NOTICE OF ADOPTED RULES

1) Heading of the Part: Robert C. Byrd Honors Scholarship Program

2) Code Citation: 23 Ill. Adm. Code 2755

3) Section Number: Adopted Action:

2755.10	New
2755.20	New
2755.30	New
2755.40	New
2755.50	New
2755.Appendix A	New

4) Statutory Authority: Implementing Section 65.60 of the Higher Education Student Assistance Act [110 ILCS 947/65.60] and Title IV, Part A, Subpart 6 of the Higher Education Act of 1965, as amended (20 U.S.C. 1070d-31 et seq.) and authorized by Section 20(f) of the Higher Education Student Assistance Act [110 ILCS 947/20(f)].

5) Effective Date of Rule(s): July 1, 1995

6) Does this rulemaking contain an automatic repeal date? No.

7) Does this rule contain incorporations by reference? No.

8) Date Filed in Agency's Principal Office: June 5, 1995

9) Notice(s) of Proposal Published in Illinois Register: February 10, 1995, 19 Ill. Reg. 1288

10) Has JCAR issued a Statement of Objections to these rule(s)? No.

11) Difference(s) between proposed and final version: Changes in this rulemaking were merely minor or technical in nature and were made in response to suggestions from the public, the Administrative Code Division and/or the Joint Committee on Administrative Rules. Also, a definition of "Scholar" was added to Section 2755.20, for clarification purposes.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes.

13) Will these rules replace an emergency rule currently in effect? No.

14) Are there any amendments pending on this Part? No.

15) Summary and Purpose of Rules: Public Act 88-0228 transferred the administrative responsibility for ten scholarship and grant programs from the Illinois State Board of Education (ISBE) to ISAC. One of these

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programs was the federal Robert C. Byrd Honors Scholarship Program, under which scholarships are provided to outstanding high school graduates who show promise of continued excellence, in an effort to recognize and promote student excellence and academic achievement. The Byrd Scholarship Program is governed primarily by federal statute (Title IV, Part A, Subpart 6 of the Higher Education Act of 1965, as amended), and federal regulations (34 CFR 654).

These adopted rules will implement ISAC's discretionary authority as the program administrator for the Byrd Scholarship Program in the State of Illinois. ISAC serves as the program administrator pursuant to an interagency agreement with ISBE. These rules set forth the eligibility criteria for applicants, the selection criteria for Byrd Scholars, and the application and institutional procedures for the awarding of assistance under this program.

16) Information and questions regarding these rules shall be directed to:

Ms. Raquel G. Martinez  
Compliance Counsel  
Illinois Student Assistance Commission  
1755 Lake Cook Road  
Deerfield, IL 60015  
(708) 948-8500

The full text of the adopted rules begins on the next page.



## ILLINOIS STUDENT ASSISTANCE COMMISSION

## NOTICE OF ADOPTED RULES

## TITLE 23: EDUCATION AND CULTURAL RESOURCES

## SUBTITLE A: EDUCATION

## CHAPTER XIX: ILLINOIS STUDENT ASSISTANCE COMMISSION

## PART 2755

## ROBERT C. BYRD HONORS SCHOLARSHIP PROGRAM

Section	
2755.10	Summary and Purpose
2755.20	Definitions
2755.30	Scholar Eligibility
2755.40	Program Procedures
2755.50	Institutional Procedures
APPENDIX A	Geographic Districts

**AUTHORITY:** Implementing Section 65.60 of the Higher Education Student Assistance Act [110 ILCS 947/65.60] and Title IV, Part A, Subpart 6 of the Higher Education Act of 1965, as amended (20 U.S.C. 1070d-31 et seq.) and authorized by Section 20(f) of the Higher Education Student Assistance Act [110 ILCS 947/20(f)].

**SOURCE:** Adopted at 19 Ill. Reg. 8386, effective JUL 01 1995.

## Section 2755.10 Summary and Purpose

- The Robert C. Byrd Honors Scholarship program promotes student excellence and outstanding academic achievement by providing scholarships to exceptional High School Graduates who show promise of continued academic excellence.
- Federal Regulations govern the responsibilities of the Illinois Student Assistance Commission (ISAC), Institutions, and Scholars. This Part implements ISAC's discretionary authority as the program administrator for the State of Illinois.
- Additional Rules and definitions are contained in the General Provisions Part at 23 Ill. Adm. Code 2700. Defined terms are indicated by the first letter being capitalized.

## Section 2755.20 Definitions

"Byrd Scholar" - An individual who receives scholarship assistance under this Part.

"Cost of Attendance" - Defined at Section 472 of the Higher Education Act of 1965, as amended (HEA).

"Federal Regulations" - Regulations promulgated by the U.S. Department of Education (ED) and codified at 34 CFR 654.

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"Geographic Districts" - One of fifteen geographic areas in Illinois, each consisting of one or more counties, designated in order to ensure an equitable geographic distribution of scholarships within the state.

"High School Graduate" - An individual who has a high school diploma or a General Educational Development (GED) certificate.

"Qualified Applicant" - An Applicant who meets the requirements of Section 2755.30.

"Scholar"- For the purposes of this Part, a Byrd Scholar.

## Section 2755.30 Scholar Eligibility

- A completed application for a Robert C. Byrd Honors Scholarship must be received in ISAC's Deerfield Office on or before January 15 preceding the Academic Year for which the scholarship is being requested.
- In addition to filing an application on a timely basis, a "Qualified Applicant" must:
  - be a United States Citizen or Eligible Noncitizen; and
  - be a Resident of Illinois; and
  - become a High School Graduate in the same high school year in which s/he submits the scholarship application, and must demonstrate outstanding academic achievement as measured by test scores and high school records; or
  - have received a General Educational Development (GED) test score recognized by the General Educational Development Testing Service as the equivalent to ranking in the top five percent of the United States' High School Graduates; and
  - be Enrolled or accepted for enrollment on a full-time basis as an undergraduate student in a postsecondary Institution that is approved by the U.S. Department of Education to participate in federal student financial assistance programs. (See, e.g., 34 CFR 600.10, 600.20, 668.12.)

c) Applicants will be notified whether they are Qualified Applicants. A non-Qualified Applicant may appeal a finding of ineligibility in accordance with 23 Ill. Adm. Code 2700.70, Appeal Procedures.

d) Byrd Scholars must be Enrolled on a full-time basis for the first year of study. If after the first year of study, the Byrd Scholar has unusual circumstances, s/he may request a waiver of the full-time enrollment requirement. A waiver form shall be completed by the Scholar, and submitted to ISAC with accompanying documentation. Provided the student continues to be enrolled on at least a half-time basis, the circumstances under which an exception to the full-time enrollment requirement may be granted include:

- the Byrd Scholar's employment hours will not permit additional course load;
- the Byrd Scholar has medical problems that will not permit

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full-time attendance, as established by the sworn statement of a licensed physician;

- 3) the Byrd Scholar is in his/her last semester of school and additional course work to complete the degree is not required; or
- 4) the care of an immediate family member due to illness or incapacitation will not permit an additional course load.

e) A Byrd Scholar may postpone or interrupt his or her full-time enrollment at an institution for a maximum of 12 months.

f) A student who receives a scholarship under this Part, and who is subsequently determined to be ineligible, shall repay to ISAC the total amount of the funds received for the period during which s/he was ineligible.

**Section 2755.40 Program Procedures**

a) Applications for the Robert C. Byrd Scholarship are available for distribution to students from: approved high schools in Illinois; offices of district and Regional Superintendents of Education of the State of Illinois; offices of ISAC in Springfield, Chicago and Deerfield.

b) ISAC shall accept applications to be a Robert C. Byrd Honors Scholar in accordance with Section 2755.30 of this Part, Scholar Eligibility.

c) If the student section of the application is incomplete, notification shall be sent to the Applicant. The Applicant will then have an opportunity to furnish the missing information; however, the application will only be considered for processing as of the date when the student section is complete and received in ISAC's Deerfield office.

d) From among timely applications, ISAC shall identify Qualified Applicants.

e) ISAC shall select new Byrd Scholars from among the highest scoring Qualified Applicants on the basis of the following criteria:

- 1) Academic Data. A Qualified Applicant's score shall be computed as follows:

$$\begin{aligned} & \left[ \left( \frac{\text{number in class divided by rank}}{\text{scale}} \right) \times .05 \right] \\ & + \left[ \left( \frac{\text{grade point average divided by scale}}{\text{scale}} \right) \times 100 \right] \\ & + \left[ \left( \frac{\text{Illinois Standard Test Score}}{\text{score}} \times 10 \right) \right] = \text{score} \end{aligned}$$

A) Grade point average shall be computed as of the end of the sixth semester of high school study.

B) SAT I scores are converted to ACT scores and test scores used in this Part shall be converted to the Illinois Standard Test Score as described in Part 2760, State Scholar Program, Section 2760.30 and Appendices A and B.

C) If both ACT and SAT I scores are submitted, the higher score, after conversion to ACT, is used.

D) For Applicants qualifying by virtue of their GED scores (see Section 2755.30(b)(4) of this Part), class rank shall be set at 5 out of 100 (top 5%) and average GED percentile rank shall be used in lieu of grade point average divided by

## NOTICE OF ADOPTED RULES

scale.

2) Geographic District. New Robert C. Byrd Honors Scholarships will be allocated to Geographic Districts in accordance with Appendix A of this Part. An Applicant's county of residence shall be determined by his or her permanent home address.

f) Scholarships will be awarded first to renewing Scholars. A Byrd Scholar will continue to be eligible for a scholarship if the postsecondary institution at which the student is enrolled certifies that the Byrd Scholar is:

- 1) maintaining enrollment as a full-time student, except as provided in Section 2755.30(d) of this Part;
- 2) maintaining Satisfactory Academic Progress as determined by the Institution;
- 3) not in default on any federal student loan nor owing repayment on any state or federal student financial assistance grant; and
- 4) not receiving federal financial aid in excess of the student's Cost of Attendance, as determined by the Institution.

g) ISAC performs the calculations regarding grade point averages, test scores, class rank and size in accordance with the procedures established for the State Scholar Program (see 23 Ill. Adm. Code 2760.30 and Appendices A and B).

h) New Byrd Scholars are selected from each of the 15 Geographic Districts, and on an at-large basis, in accordance with the number of awards set forth in Appendix A to this Part. The at-large Scholars shall be chosen from among the highest scoring non-selected Qualified Applicants statewide, regardless of their geographic district.

i) The total number of scholarships awarded in a given fiscal year is contingent upon available funding (see Section 419D of the Higher Education Act of 1965, as amended (20 U.S.C. 1070d-34), Allocation Among States), notwithstanding the number of new scholarships outlined in Appendix A to this Part.

j) Byrd Scholars will be informed of their selection by the April 1 preceding the Academic Year for which the scholarship was requested.

k) All high schools with Robert C. Byrd Scholars will be notified of the Scholars attending their institution by April 15.

l) All Qualified Applicants not selected to be Byrd Scholars will be sent letters notifying them that they have not been chosen.

m) If an individual does not accept the offer of a new scholarship award, the next highest scoring Qualified Applicant not yet selected from the same Geographic District will be chosen to receive a scholarship.

n) New and renewal Byrd Scholars will complete an "Eligibility Certification," which includes annual certification statements required by ED.

o) ISAC shall send verification/payment rosters to institutions on which they will certify the students' eligibility to receive the Byrd Scholarships.

p) Scholarship funds are applicable towards two semesters/three quarters of full-time study within an Academic Year, and shall be sent to the Institution on behalf of the Scholar(s).



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## Section 2755.50 Institutional Procedures

- a) Institutions shall ensure that ISAC receives verification/payment rosters prior to the beginning of the fall Term.
- b) Upon receipt of scholarship funds, the Institution(s) shall verify that the Byrd Scholar(s) continues to be Enrolled. The Institution may then credit scholarship funds to the recipient's account for expenses then due and payable. The balance of the scholarship funds shall be released to the Scholar. If the Byrd Scholar withdraws from enrollment, the Institution shall return the amount of the scholarship to ISAC for the semester(s) or quarter(s) not attended.
- c) The total amount of the Byrd Scholarship awarded to a Byrd Scholar in any given Academic Year, when added to the other Federal or State financial aid available to the Byrd Scholar for that year, cannot exceed the student's Cost of Attendance.
- 1) The amount of any federally guaranteed student loans should be decreased prior to reducing the amount of the Byrd Scholarship.
  - 2) The Byrd Scholarship should be decreased prior to reducing the amount of a Federal Pell Grant.
  - 3) A Monetary Award Program (MAP) grant should be decreased prior to reducing the amount of a Byrd Scholarship.
- d) Except as provided in Section 2755.50(c) of this Part, a Byrd Scholar may receive \$1500 for each Academic Year, up to a maximum of four years of study.

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## Section 2755. APPENDIX A Geographic Districts

District Number	Counties	Number of New Scholarships
1	Cook	110
2	DuPage	22
3	Lake	11
4	Winnebago, Boone, McHenry	11
5	Mercer, McDonough, Adams, Schuyler, Warren, Fulton, Sangamon, Cass, Menard, Hancock, Mason, Henderson	11
6	DeKalb, Kane, Lee	11
7	Kendall, Will, Grundy	11
8	Jo Daviess, Ogle, Carroll, Henry, Bureau, Rock Island, Whiteside, Stephenson	11
9	LaSalle, Putnam, Livingston, Ford, McLean, Kankakee, Iroquois	11
10	Knox, Stark, Marshall, Peoria, Woodford, Tazewell	11
11	Champaign, Edgar, Vermilion, Coles, Clark, Douglas, Cumberland, Jasper, Crawford	11
12	Logan, Dewitt, Piatt, Macon, Christian, Moultrie, Shelby, Montgomery, Clay, Marion, Effingham, Bond, Fayette	11
13	Calhoun, Green, Scott, Brown, Pike, Jersey, Morgan, Madison, Macoupin	11
14	Richland, Wayne, Lawrence, Wabash, Edwards, White, Jefferson, Union, Franklin, Hardin, Hamilton, Saline, Gallatin, Johnson, Pope, Jackson, Massac, Alexander, Pulaski, Williamson	11

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District Number 15 Counties St. Clair, Perry, Clinton, Monroe, Washington, Randolph

Number of New Scholarships 11

At-Large 11

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## NOTICE OF ADOPTED AMENDMENT(S)

- 1) Heading of the Part: State Scholar Program
- 2) Code Citation: 23 Ill. Adm. Code 2760
- 3) Section Number: Adopted Action:
 

2760.30	Amended
2760.APPENDIX A	New
2760.APPENDIX B	New
- 4) Statutory Authority: Implementing Section 25 and authorized by Section 20 (f) of the Higher Education Student Assistance Act (110 ILCS 947/25 and 20(f)).
- 5) Effective Date of Rule(s) Amendments: July 1, 1995
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this amendment contain incorporations by reference? No
- 8) Date Filed in Agency's Principal Office: June 5, 1995
- 9) Notice(s) of Proposal Published in Illinois Register: January 27, 1995, 19 Ill. Reg. 920
- 10) Has JCAR issued a Statement of Objections to these rule(s)? No
- 11) Difference(s) between proposed and final version: Changes in this rulemaking were merely minor or technical in nature and were made in response to suggestions from the public, the Administrative Code Division and/or the Joint Committee on Administrative Rules.
- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes
- 13) Will these amendments replace an emergency rule currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Amendments: ISAC annually reviews its rules in order to respond to market changes and client suggestions, to implement State and federal statutory changes, and to clarify issues that have arisen during the previous year. In addition to making minor technical and grammatical changes throughout this Part, ISAC adopted the following substantive amendments: Section 2760.30(a) has been modified to reflect a change in one of the tests which applicants may take in order to be



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considered for designation under this program. The old Scholastic Aptitude Test, or SAT, has been replaced by the new SAT I: Reasoning Test. The new test has a different "recentered" scoring scale, which no longer permits the direct conversion of the verbal and math scores into an equivalent ACT score. As a result, Section 2760.30(e) has been amended and two new tables have been added as appendices A and B, which convert new SAT I scores into the original equivalent SAT scores. The resulting old scores may then be converted into an equivalent ACT score, as was previously done. And finally, Section 2760.30(i) is amended to clarify that students who qualify for designation as State Scholars by virtue of having test scores at or above the 95th percentile may do so regardless of their class rank.

## 16) Information and questions regarding these rules shall be directed to:

Ms. Raquel G. Martinez  
Compliance Counsel  
Illinois Student Assistance Commission  
1755 Lake Cook Road  
Deerfield, IL 60015  
(708) 948-8500

The full text of the adopted rules begins on the next page.

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TITLE 23: EDUCATION AND CULTURAL RESOURCES  
SUBTITLE A: EDUCATION  
CHAPTER XIX: ILLINOIS STUDENT ASSISTANCE COMMISSION

PART 2760  
STATE SCHOLAR PROGRAM

Section  
2760.5 Summary and Purpose  
2760.10 Selection Criteria  
2760.30 Testing and Class Ranking of Students to be Considered for Program  
2760.40 Other Information

## APPENDIX A

SAT Verbal Equivalence Table

## APPENDIX B

SAT Mathematical Equivalence Table

AUTHORITY: Implementing Section 25 and authorized by Section 20(f) of the Higher Education Student Assistance Act [110 ILCS 947/25 and 20(f)].

SOURCE: Adopted at 3 Ill. Reg. 4, p. 38, effective January 26, 1979; amended at 4 Ill. Reg. 16, p. 118, effective April 7, 1980; rules repealed, new rules adopted at 5 Ill. Reg. 7251, effective June 26, 1981; amended at 6 Ill. Reg. 8413, effective June 30, 1982; codified at 7 Ill. Reg. 10878; amended at 9 Ill. Reg. 20877, effective January 1, 1986; amended at 11 Ill. Reg. 3242, effective January 29, 1987; amended at 11 Ill. Reg. 14137, effective August 10, 1987; amended at 13 Ill. Reg. 8654, effective July 1, 1989; transferred from Chapter IX, 23 Ill. Adm. Code 1760 (State Scholarship Commission) to Chapter XIX, 23 Ill. Adm. Code 2760 (Illinois Student Assistance Commission) pursuant to P.A. 86-168, effective July 1, 1989, at 13 Ill. Reg. 17868; amended at 14 Ill. Reg. 10589, effective July 1, 1990; amended at 16 Ill. Reg. 11321, effective July 1, 1992; amended at 17 Ill. Reg. 10624, effective July 1, 1993; amended at 18 Ill. Reg. 10346, effective July 1, 1994; amended at 19 Ill. Reg. 8395, effective JUL 01 1995.

Section 2760.30 Testing and Class Ranking of Students to be Considered for Program

- a) To be considered for the State Scholar Program, a student must take either the American College Testing (ACT) Assessment or the College Board's SAT I: Reasoning Test ~~Scholastic Aptitude Test-SAT~~, during his/her fifth or sixth semester of high school. Students planning to graduate from high school in other than the traditional four years must take such examination in an equivalent term; e.g., the three-year graduate must take the examination in the third or fourth semester.
- 1) A student may take either or both examinations during the designated period.
  - 2) All scores from such tests taken during the designated period must be submitted to ISAC.

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- 3) If a student submits scores from any two examinations taken during the designated period, ISAC will use the higher of the two scores.
- 4) If the student submits scores from more than two examinations, taken during the designated period, ISAC will disregard the lowest score and use the average of the remaining scores.
- 5) When a student submits scores to ISAC, the student must report his/her Academic Level at the time the test was taken.
- 6) ISAC will accept supplementary score reports of tests taken during the designated period upon the student's authorization to the test service. Such authorization by the student must be received by ISAC before August 1.
- 7) Students who, for any reason, are unable to take a test on a regular testing date should make special arrangements to be tested in accordance with the procedures of the testing service. Any such special arrangements must take into account the test score submission deadline in subsections (a) and (b) of this Section.
- 8) High schools ~~Schools~~ shall provide to ISAC the sixth semester class ranks of students who desire to be considered for the State Scholar Program.
- 9) Class ranks are to be calculated so that the class rank for the lowest Grade Point Average (GPA) equals the total number of students being ranked.

Example:	Class Rank	GPA
	1	99.3
	2	98.9
	3	98.9
	4	98.1
	5	97.9
	6	97.9
	7	97.4

- 2) The equivalent Term rank shall be provided for students planning to graduate in other than the traditional four years; for example, class ranks for three-year graduates shall be determined at the conclusion of the fourth semester.
- 3) Test scores submitted in accordance with this Part shall be converted to an Illinois Standard Test Score as follows:
  - 1) The ACT Assessment Composite Score shall be the Illinois Standard Test Score.
  - 2) Effective with all SAT I tests administered as of April, 1995, recentered SAT I verbal and math scores shall be converted to original SAT scores using the equivalence tables contained in Appendices A and B to this Part.
- 23) ~~The--Scholastic--Attitude--Test--Scores--shall--become--the--Illinois Standard--Test--Score--by--adding--the--The~~ equivalent original SAT verbal and math scores shall be added, and then converted to the

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Illinois Standard Test Score using the table below, to determine the ACT-equivalent score.

Illinois Standard Test Score Table

Illinois Standard Test Score	SAT V + M	ACT Composite
36	1550 to 1600	36
35	1490 to 1540	35
34	1440 to 1480	34
33	1380 to 1430	33
32	1330 to 1370	32
31	1290 to 1320	31
30	1240 to 1280	30
29	1200 to 1230	29
28	1160 to 1190	28
27	1110 to 1150	27
26	1070 to 1100	26
25	1030 to 1060	25
24	990 to 1020	24
23	950 to 980	23
22	910 to 940	22
21	860 to 900	21
20	820 to 850	20
19	770 to 810	19
18	720 to 760	18
17	680 to 710	17
16	630 to 670	16
15	580 to 620	15
14	540 to 570	14
13	500 to 530	13
12	460 to 490	12
11	430 to 450	11
10	410 to 420	10
9	400	9

f) High School class ranks submitted in accordance with this Part shall be converted to an Illinois Standard Rank Score as follows:

- 1) First, determine the percentile of the class rank for each student in accordance with the following formula:  
Percentile = [Size of Class MINUS (Rank in Class minus .5)] divided by Size of Class
- 2) Then, use table below to convert a percentile class rank to the Illinois Standard Rank Score.

Percentile	Illinois Standard Rank Score
99.75 - 99.99	30
99.54 - 99.74	29



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- 99.19 - 99.53 28
- 98.62 - 99.18 27
- 97.73 - 98.61 26
- 96.42 - 97.72 25
- 94.53 - 96.41 24
- 91.93 - 94.52 23
- 88.50 - 91.92 22
- 84.14 - 88.49 21
- 78.82 - 84.13 20
- 72.58 - 78.81 19
- 65.55 - 72.57 18
- 57.94 - 65.54 17
- 50.00 - 57.93 16

g) An Illinois Weighted Selection Score for each student shall be computed by multiplying the Illinois Standard Test Score by two, and adding that result to the Illinois Standard Rank Score.

h) In any Academic Year, the number of State Scholars is approximately equal to ten percent of the estimated total number of Illinois high school graduates. ISAC annually establishes a minimum Weighted Selection Score to yield this result.

i) Notwithstanding the previous provisions in this section, any student nominated by his or her school shall be designated a State Scholar if that student achieves a score at or above the 95th percentile on the American College Testing (ACT) standardized assessment examination, or the equivalent thereof on a comparable examination, regardless of that student's class rank.

(Source: Amended at 19 Ill. Reg. 8395, effective JUL 01 1995)

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Section 2760.APPENDIX A SAT Verbal Equivalence Table

Recentered Scale to Original Scale

Recentered Scale	Original Scale	Recentered Scale	Original Scale
800	740	500	420
790	720	490	410
780	710	480	400
770	710	470	390
760	700	460	380
750	690	450	370
740	680	440	360
730	670	430	350
720	660	420	340
710	650	410	330
700	640	400	320
690	630	390	310
680	620	380	300
670	610	370	290
660	590	360	280
650	580	350	270
640	570	340	260
630	560	330	250
620	550	320	250
610	540	310	240
600	520	300	230
590	510	290	220
580	500	280	210
570	490	270	210
560	480	260	200
550	470	250	200
540	460	240	200
530	450	230	200
520	440	220	200
510	430	210	200

(Source: Added at 19 Ill. Reg. 8395, effective JUL 01 1995)

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Section 2760.APPENDIX B SAT Mathematical Equivalence Table

Recentered Scale to Original Scale

Recentered Scale	Original Scale	Recentered Scale	Original Scale
800	780	500	470
790	770	490	460
780	760	480	440
770	750	470	430
760	740	460	420
750	730	450	410
740	720	440	400
730	710	430	390
720	700	420	370
710	690	410	360
700	680	400	350
690	670	390	340
680	660	380	330
670	650	370	320
660	640	360	310
650	630	350	300
640	620	340	290
630	610	330	280
620	600	320	270
610	590	310	260
600	580	300	250
590	570	290	240
580	560	280	230
570	550	270	220
560	540	260	210
550	530	250	200
540	520	240	
530	510	230	
520	500	220	
510	480	210	

(Source: Added at 19 Ill. Reg. 8395, effective JUL 01 1995)

ILLINOIS REGISTER  
DEPARTMENT OF INSURANCE  
NOTICE OF EMERGENCY AMENDMENTS

1) Heading of the Part: Traditional Long-Term Care Insurance

2) Code Citation: 50 Ill. Adm. Code 2012

3) Section Numbers: Emergency Action:  
2012.122 Emergency Amendment

4) Statutory Authority: Implementing and authorized by Section 351A-1 of the Illinois Insurance Code [215 ILCS 5/351A-1].

5) Effective Date of Emergency Amendment: June 13, 1995

6) If this emergency amendment is to expire before the end of the 150-day period, please specify the date on which it is to expire: This Emergency Amendment will expire on September 1, 1995.

7) Date Filed in Agency's Principal Office: June 13, 1995

8) Reason for Emergency: Insurance companies in Illinois will not have adequate time to provide the necessary training required by Section 2012.122(d) before the July 1, 1995 effective date. As a result, consumers in this state will be unable to purchase long-term care insurance coverage. The Department feels that the public interest will be better served if we allow insurance companies until September 1, 1995 to meet the requirements found in Section 2012.122(d).

9) A Complete Description of the Subjects and Issues Involved: The Department is adding language to Section 2012.122(d) which will give insurance companies an additional 60 days to come into compliance with the training requirements for their insurance producers.

10) Are there any proposed amendments to this Part pending? Yes

11) Statement of Statewide Policy Objectives: This emergency amendment will not require this Department to establish, expand or modify our activities in such a way as to necessitate additional expenditures from local revenues.

12) Information and questions regarding this amendment:

David Van Lieshout	Denise Fuchs
Assistant Chief Counsel	Rules Unit Supervisor
Department of Insurance	or
320 W. Washington Street	320 W. Washington Street
Springfield, IL 62767-0001	Springfield, IL 62767-0001
(217) 782-8216	(217) 785-8560



## DEPARTMENT OF INSURANCE

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The full text of the Emergency Amendments begins on the next page:

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## NOTICE OF EMERGENCY AMENDMENTS

## TITLE 50: INSURANCE

## CHAPTER 1: DEPARTMENT OF INSURANCE

## SUBCHAPTER 2: ACCIDENT AND HEALTH INSURANCE

## PART 2012

## TRADITIONAL LONG-TERM CARE INSURANCE

Section	Purpose
2012.10	Applicability and Scope
2012.20	Definitions
2012.30	Policy Definitions
2012.40	Policy Practices and Provisions
2012.50	Unintentional Lapse
2012.55	Required Disclosure Provisions
2012.60	Prohibition Against Post Claims Underwriting
2012.65	Minimum Standards for Home Health and Community Care Benefits in Long-Term Care Insurance Policies
2012.70	Requirement to Offer Inflation Protection
2012.80	Requirements for Application Forms and Replacement Coverage
2012.90	Reporting Requirements
2012.95	Filing Requirement
2012.100	Loss Ratio
2012.110	Filing Requirements for Advertising
2012.115	Reserve Standards
2012.120	Standards for Marketing
2012.122	Standards for Marketing
EMERGENCY	
2012.124	Appropriateness of Recommended Purchase
2012.126	Prohibition Against Preexisting Conditions and Probationary Periods in Replacement Policies or Certificates
2012.130	Standard Format Outline of Coverage Requirements
2012.140	Requirement to Deliver Shopper's Guide
2012.150	Penalties
EXHIBIT A	Replacement Notice for Other Than Direct Response Solicitations
EXHIBIT B	Replacement Notice for Direct Response Solicitations
EXHIBIT C	Standard Format Outline of Coverage
EXHIBIT D	Rescission Reporting Format
EXHIBIT E	Class of Insurance - Accident and Health

AUTHORITY: Implementing and authorized by Section 351A-11 of the Illinois Insurance Code [215 ILCS 5/351A-11].

SOURCE: Adopted at 14 Ill. Reg. 10345, effective June 15, 1990; amended at 18 Ill. Reg. 2238, effective February 1, 1994; amended at 19 Ill. Reg. 2832, effective July 1, 1995; emergency amendment at 19 Ill. Reg. 8403, effective 3/13/1995, to expire September 1, 1995.

Section 2012.122 Standards for Marketing

## DEPARTMENT OF INSURANCE

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EMERGENCY

a) Every insurer, as defined herein, marketing traditional long-term care insurance coverage in this State, directly or through its producers, shall:

- 1) Establish marketing procedures to assure that any comparison of policies by its producers will be accurate.
- 2) Establish marketing procedures to assure that excessive insurance is not sold or issued.
- 3) Display prominently by type or stamp on the first page of the outline of coverage and policy the following: "NOTICE TO BUYER: THIS POLICY MAY NOT COVER ALL THE COSTS ASSOCIATED WITH LONG-TERM CARE INCURRED BY THE BUYER DURING THE PERIOD OF COVERAGE. THE BUYER IS ADVISED TO REVIEW CAREFULLY ALL POLICY LIMITATIONS."
- 4) Inquire of a prospective applicant or enrollee for traditional long-term care insurance whether they already have accident and the types sickness or traditional long-term care insurance and the types and amounts of any such insurance.
- 5) Every insurer or entity marketing traditional long-term care insurance shall establish auditable procedures for verifying compliance with this subsection.
- 6) The insurer shall, at solicitation, provide written notice to the prospective policyholder and certificateholder of the Senior Health Insurance Program (SHIP) that such a program is available and the most current name, address and telephone number of the program. The current address and toll-free telephone number is 320 W. Washington Street, Springfield, Illinois 62767, 1-800-548-9034.

7) For traditional long-term care health insurance policies and certificates, use the terms "noncancellable" or "level premium" only when the policy or certificate conforms to this Part.

8) Traditional long-term care insurance policies or certificates sold after July 1, 1995 that are not under the Illinois Long-Term Care Partnership Program shall include a statement on the outline of coverage, the policy or certificate application, and the front page of the policy or certificate in bold type and in a separate box as follows: "THIS POLICY (CERTIFICATE) IS NOT APPROVED FOR MEDICAID ASSET PROTECTION UNDER THE ILLINOIS LONG-TERM CARE PARTNERSHIP PROGRAM. HOWEVER, THIS POLICY (CERTIFICATE) IS AN APPROVED TRADITIONAL LONG-TERM CARE POLICY (CERTIFICATE) UNDER STATE INSURANCE REGULATIONS. FOR INFORMATION ABOUT POLICIES AND CERTIFICATES APPROVED UNDER THE ILLINOIS LONG-TERM CARE PARTNERSHIP PROGRAM, CALL THE SENIOR HELPLINE AT THE DEPARTMENT ON AGING AT 1-800-252-8966."

b) In addition to the practices prohibited in Article XXVI (Ill. Rev. Stat. 1991, ch. 73, par. 1028 et seq.) [215 ILCS 5/421 et seq.], the following acts and practices are prohibited:

## DEPARTMENT OF INSURANCE

## NOTICE OF EMERGENCY AMENDMENTS

- 1) Twisting. Knowingly making any misleading representation or incomplete or fraudulent comparison of any insurance policies or insurers for the purpose of inducing, or tending to induce, any person to lapse, forfeit, surrender, terminate, retain, pledge, assign, borrow on or convert any insurance policy or to take out a policy of insurance with another insurer.
- 2) High pressure tactics. Employing any method of marketing having the effect of, or tending to induce the purchase of insurance through force, fright, threat, whether explicit or implied, or undue pressure to purchase or recommend the purchase of insurance.
- 3) Cold lead advertising. Making use directly or indirectly of any method of marketing which fails to disclose in a conspicuous manner that a purpose of the method of marketing is solicitation of insurance and that contact will be made by an insurance producer or insurance company.
- c) With respect to the obligations set forth in this subsection, the primary responsibility of an association when procuring traditional long-term care insurance shall be to educate its members concerning long-term care issues in general so that its members can make informed decisions. Associations should provide information regarding traditional long-term care insurance policies or certificates to ensure that members of such associations receive a complete explanation of the features in the policies or certificates that are being sold by the insurer.

1) The insurer shall file with this Department the following material:

- A) The policy and certificate,
- B) A corresponding outline of coverage, as referenced in Section 2012.130 and Exhibit C of this Part, and
- C) All advertisements requested by the Department.
- 2) The association shall disclose in any traditional long-term care insurance solicitation:
  - A) The specific nature and amount of the compensation arrangements (including all fees, commissions, administrative fees and other forms of financial support) that the association receives from the sale of the policy or certificate to its members, and
  - B) A brief description of the processes under which such policies and the insurer issuing such policies were selected.
- 3) If the association and the insurer have interlocking directorates or trustee arrangements, the association shall disclose such fact to its members.
- 4) The board of directors of associations shall review and approve such insurance policies as well as the compensation arrangements made with the insurer.
- 5) The association shall also engage the services of a person with



## DEPARTMENT OF INSURANCE

## NOTICE OF EMERGENCY AMENDMENTS

expertise in long-term care insurance, not affiliated with the insurer, to conduct an examination of the policies including its benefits, features, and rates and update such examination thereafter in the event of a material change.

6) No group long-term care insurance policy or certificate may be issued to an association unless the insurer files with this Department the information required in this subsection.

7) The insurer shall not issue a traditional long-term care policy or certificate to an association or continue to market such a policy or certificate unless the insurer certifies annually that the association has complied with the requirements set forth in this subsection.

d) The insurer shall provide producer training as follows:

1) The insurer shall provide written evidence to the Department of Insurance by September 1, 1995 that procedures are in place to assure that no producer will be authorized to market, sell, solicit, or otherwise contact any person for the purpose of marketing a traditional long-term care policy or certificate unless the producer has completed six (6) hours of training on traditional long-term care insurance as prescribed in Exhibit E of this Part; the course shall be specifically titled "Traditional Long-Term Care Insurance Policy." The traditional long-term care course cannot be included as a part of any other certified continuing education course; however, this course may satisfy a part of the continuing education requirements of Section 494.1(c) of the Illinois Insurance Code (215 ILCS 5/491.1(c)). Insurers and producers shall maintain evidence of completion of the hours of training required and shall provide proof of completion upon request. Such proof of completion shall be in the format prescribed by 50 Ill. Adm. Code 3119.019, Exhibit D, and shall be signed by the producer and the provider of the education attesting to the completion of the required training.

2) The required training hours referenced in subsection 2012.122(d)(1) above may qualify as part of the continuing education requirements of Section 494.1(c) of the Illinois Insurance Code (215 ILCS 5/494.1(c)) only if the training course has been certified under 50 Ill. Adm. Code 3119.30. Each educational provider shall submit its request for certification to the Director on a form prescribed by 50 Ill. Adm. Code 3119.019, Exhibit B at least 30 days prior to any course being offered. All educational providers and training courses qualifying for continuing education credit shall be renewed on an annual basis.

(Source: Emergency amendment at 19 Ill. Reg. effective 8403, to expire September 1, 1995)

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

1) Heading of the Part: Aid to the Aged, Blind or Disabled

2) Code Citation: 89 Ill. Adm. Code 113

3) Section Numbers: Emergency Action:

113.1, 113.40, 113.50 Amendment

113.330 Repeal

113.400 Amendment

113.405, 113.410, 113.415 Repeal

113.420, 113.425, 113.430 Repeal

113.435, 113.440, 113.445 Repeal

113.450 Repeal

4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, par. 12-13) [305 ILCS 5/12-13] and Public Act 89-21.

5) Effective Date of Amendments: June 9, 1995

6) If these Emergency Amendments are to expire before the end of the 150-day period, please specify the date on which it is to expire: Not Applicable

7) Date Filed in Agency's Principal Office: June 9, 1995

8) Reason for Emergency: This rulemaking is necessary to comply with provisions of Public Act 89-21 which require the Department of Public Aid to abolish the Interim Assistance program effective September 1, 1995. These emergency amendments are necessary to establish procedures for applications filed on or after July 1, 1995, and to provide for persons receiving Interim Assistance before September 1, 1995. Section 10-95 of Public Act 89-21 specifically allows the Department to implement the changes made by that amendatory Act through the use of Emergency Rulemaking.

9) Complete Description of the Subjects and Issues Involved: Pursuant to Public Act 89-21, the Department is making the following changes in the Interim Assistance and Transitional Assistance programs. These emergency amendments are necessary to establish procedures for applications filed on or after July 1, 1995, and to provide for persons receiving Interim Assistance before September 1, 1995. Related changes in the Transitional Assistance program are being proposed in 89 Ill. Adm. Code 114. There are also some changes being proposed in 89 Ill. Adm. Code 110 that relate to these programs.

1. The Interim Assistance program is being abolished effective September 1, 1995. Persons receiving Interim Assistance will continue to do so

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

through August 31, 1995, unless otherwise cancelled under the eligibility requirements of the program. Applications for assistance filed on or after July 1, 1995, will not be considered under the Interim Assistance program but instead will be considered under the Transitional Assistance program. All Interim Assistance cases will be cancelled effective September 1, 1995. Persons cancelled can apply for Transitional Assistance.

2. The eligibility criteria for the Transitional Assistance program is being revised effective July 1, 1995. The following categories are eliminated as categories of eligibility: a) serious medical, physical or mental problem which prevents the client from working; b) lack of a high school diploma or GED, earnings of less than \$2,000 in the last year, lack of earnings of \$200 or more in three of the last 24 months and inability to read English at the 5.9 grade level; c) addictive drug or alcohol abuse problem which prevents the client from working.

3. Effective July 1, 1995, clients who apply for Transitional Assistance who claim to be disabled and unable to work and are awaiting a determination of eligibility for Supplemental Security Income (SSI) will be considered for eligibility under a new category. The Department will make a determination of disability for these persons. The determination of disability will use the same criteria as used by the Social Security Administration under the SSI program. If found disabled, the client will be eligible for cash benefits under Transitional Assistance, except as noted below. In addition, the client will be eligible for medical assistance under the Social Security Act due to the Department's determination of disability. If the client is not disabled, the client is ineligible for Transitional Assistance unless eligible under one of the other six remaining categories. If eligible for Transitional Assistance under one of the other six categories, the client will be eligible for medical assistance under the more restrictive General Assistance medical program.

4. Individuals determined disabled whose disability is based solely on substance addictions (drug abuse and alcoholism) and whose disability would cease were their addictions to end will be eligible for medical assistance only and will not receive a cash grant.

5. The Payment Level for Transitional Assistance is being reduced to \$60 per month effective July 1, 1995. This amount will be effective in the City of Chicago, where the Transitional Assistance program is administered by the Department of Public Aid, as well as all local governmental units receiving State funds outside the City of Chicago, where the Transitional Assistance program is administered by the local governmental units. Public Act 89-21 allows the Department to reduce Transitional Assistance cash grants during the fiscal year in order to

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

keep spending within the amount appropriated. If necessary, appropriate changes will be made to Sections 114.351, 114.352 and 114.353.

6. The SSI Advocacy program is retained, though its reference is moved from the Sections on Interim Assistance to the Sections on Transitional Assistance. Individuals determined disabled whose disability is based solely on substance addictions will not be referred to the SSI Advocacy Program.

7. Payment of attorney's fees for the successful representation of SSI and VA applicants before an Administrative Law Judge is retained for clients who receive cash assistance under a General Assistance program administered by the Department of Public Aid. Attorney's fees will not be paid for individuals determined disabled whose disability is based solely on substance addictions, nor for individuals who receive an award for both SSI and SSA benefits.

10) Are there any Proposed Amendments pending to this Part? No

11) Statement of Statewide Policy Objectives: These emergency amendments do not affect units of local government.

12) Information and questions regarding these Emergency Amendments shall be directed to:

Name: Judy Umunna  
Address: Bureau of Rules and Regulations  
Illinois Department of Public Aid  
100 South Grand Avenue East, Third Floor  
Springfield, Illinois 62762  
Telephone: (217) 524-3215

The full text of the Emergency Amendments begins on the next page:





## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

## SUBPART E: OTHER PROVISIONS

Section	Persons Who May Be Included In the Assistance Unit
113.300	Grandfathered Cases
113.301	Interim Assistance (Repealed)
113.302	Special Needs Authorizations
113.303	Retrospective Budgeting
113.304	Budgeting Schedule
113.305	Purchase and Repair of Household Furniture (Repealed)
113.306	Property Repairs and Maintenance
113.307	Excess Shelter Allowance
113.308	Limitation on Amount of AABD Assistance to Recipients from Other States
113.309	Redetermination of Eligibility
113.320	Attorney's Fees for VA Appellants (Repealed)
113.330	
EMERGENCY	

## SUBPART F: INTERIM ASSISTANCE

Section	Description of the Interim Assistance Program
113.400	Pending SSI Application (Repealed)
EMERGENCY	
113.405	More Likely Than Not Eligible for SSI (Repealed)
EMERGENCY	
113.410	Non-Financial Factors of Eligibility (Repealed)
EMERGENCY	
113.415	Financial Factors of Eligibility (Repealed)
EMERGENCY	
113.420	Payment Levels for Chicago Interim Assistance Cases (Repealed)
EMERGENCY	
113.425	Payment Levels for all Interim Assistance Cases Outside Chicago (Repealed)
EMERGENCY	
113.430	Medical Eligibility (Repealed)
EMERGENCY	
113.435	Attorney's Fees for SSI Applicants (Repealed)
EMERGENCY	
113.440	Advocacy Program for Persons Receiving Interim Assistance (Repealed)
EMERGENCY	
113.445	Limitation on Amount of Interim Assistance to Recipients from Other States (Repealed)
EMERGENCY	
113.450	Attorney's Fees for SSI Appellants (Renumbered)
EMERGENCY	

AUTHORITY: Implementing Article III and authorized by Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat., ch. 23, pars. 3-1 et seq. and

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

## 12-13) (305 ILCS 5/Art. III and 12-13).

SOURCE: Filed effective December 30, 1977; peremptory amendment at 2 Ill. Reg. 17, p. 117, effective February 1, 1978; amended at 2 Ill. Reg. 31, p. 134, effective August 5, 1978; emergency amendment at 2 Ill. Reg. 37, p. 4, effective August 30, 1978, for a maximum of 150 days; peremptory amendment at 2 Ill. Reg. 46, p. 44, effective November 1, 1978; emergency amendment at 3 Ill. Reg. 16, p. 41, effective April 9, 1979, for a maximum of 150 days; emergency amendment at 3 Ill. Reg. 28, p. 182, effective July 1, 1979, for a maximum of 150 days; amended at 3 Ill. Reg. 33, p. 399, effective August 18, 1979; amendment at 3 Ill. Reg. 33, p. 415, effective August 18, 1979; amended at 3 Ill. Reg. 38, p. 243, effective September 21, 1979; peremptory amendment at 3 Ill. Reg. 38, p. 321, effective September 7, 1979; amended at 3 Ill. Reg. 40, p. 140, effective October 6, 1979; amended at 3 Ill. Reg. 46, p. 36, effective November 2, 1979; amended at 3 Ill. Reg. 47, p. 96, effective November 13, 1979; amended at 3 Ill. Reg. 48, p. 1, effective November 15, 1979; peremptory amendment at 4 Ill. Reg. 9, p. 259, effective February 22, 1980; amended at 4 Ill. Reg. 10, p. 258, effective February 25, 1980; at 4 Ill. Reg. 12, p. 551, effective March 10, 1980; amended at 4 Ill. Reg. 27, p. 387, effective June 24, 1980; emergency amendment at 4 Ill. Reg. 29, p. 294, effective July 8, 1980, for a maximum of 150 days; amended at 4 Ill. Reg. 37, p. 797, effective September 2, 1980; amended at 4 Ill. Reg. 37, p. 800, effective September 2, 1980; amended at 4 Ill. Reg. 45, p. 134, effective October 27, 1980; amended at 5 Ill. Reg. 766, effective January 2, 1981; amended at 5 Ill. Reg. 1134, effective January 26, 1981; peremptory amendment at 5 Ill. Reg. 5722, effective June 1, 1981; amended at 5 Ill. Reg. 7071, effective June 23, 1981; amended at 5 Ill. Reg. 7104, effective June 23, 1981; amended at 5 Ill. Reg. 8041, effective July 27, 1981; amended at 5 Ill. Reg. 8052, effective July 24, 1981; peremptory amendment at 5 Ill. Reg. 8106, effective August 1, 1981; peremptory amendment at 5 Ill. Reg. 10062, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10079, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10095, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10113, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10124, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10131, effective October 1, 1981; amended at 5 Ill. Reg. 10730, effective October 1, 1981; amended at 5 Ill. Reg. 10733, effective October 1, 1981; amended at 5 Ill. Reg. 10760, effective October 1, 1981; amended at 5 Ill. Reg. 10767, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 11647, effective October 16, 1981; peremptory amendment at 6 Ill. Reg. 611, effective January 1, 1982; amended at 6 Ill. Reg. 1216, effective January 14, 1982; emergency amendment at 6 Ill. Reg. 2447, effective March 1, 1982, for a maximum of 150 days; peremptory amendment at 6 Ill. Reg. 2452, effective February 11, 1982; peremptory amendment at 6 Ill. Reg. 6475, effective May 18, 1982; peremptory amendment at 6 Ill. Reg. 6912, effective May 20, 1982; emergency amendment at 6 Ill. Reg. 7299, effective June 2, 1982, for a maximum of 150 days; amended at 6 Ill. Reg. 8115, effective July 1, 1982; amended at 6 Ill. Reg. 8142, effective July 1, 1982; amended at 6 Ill. Reg. 8159, effective July 1, 1982; amended at 6 Ill. Reg. 10970, effective August 26, 1982; amended at 6 Ill. Reg. 11921,



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effective September 21, 1982; amended at 6 Ill. Reg. 12293, effective October 1, 1982; amended at 6 Ill. Reg. 12318, effective October 1, 1982; amended at 6 Ill. Reg. 13754, effective November 1, 1982; rules repealed, new rules adopted and codified at 7 Ill. Reg. 907, effective January 10, 1983; amended (by adding Sections being codified with no substantive change) at 7 Ill. Reg. 5195; amended at 7 Ill. Reg. 9367, effective August 1, 1983; amended at 7 Ill. Reg. 17351, effective December 21, 1983; amended at 8 Ill. Reg. 537, effective December 30, 1983; amended at 8 Ill. Reg. 5225, effective April 9, 1984; amended at 8 Ill. Reg. 6746, effective April 27, 1984; amended at 8 Ill. Reg. 11414, effective June 27, 1984; amended at 8 Ill. Reg. 13273, effective July 16, 1984; amended (by sections being codified with no substantive change) at 8 Ill. Reg. 17895; amended at 8 Ill. Reg. 18896, effective September 26, 1984; amended at 9 Ill. Reg. 5335, effective April 5, 1985; amended at 9 Ill. Reg. 8166, effective May 17, 1985; amended at 9 Ill. Reg. 8657, effective May 25, 1985; amended at 9 Ill. Reg. 11302, effective July 5, 1985; amended at 9 Ill. Reg. 11636, effective July 8, 1985; amended at 9 Ill. Reg. 11991, effective July 12, 1985; amended at 9 Ill. Reg. 12806, effective August 9, 1985; amended at 9 Ill. Reg. 15896, effective October 4, 1985; amended at 9 Ill. Reg. 16291, effective October 10, 1985; emergency amendment at 10 Ill. Reg. 364, effective January 1, 1986; amended at 10 Ill. Reg. 1183, effective January 10, 1986; amended at 10 Ill. Reg. 6956, effective April 16, 1986; amended at 10 Ill. Reg. 8794, effective May 12, 1986; amended at 10 Ill. Reg. 10628, effective June 3, 1986; amended at 10 Ill. Reg. 11920, effective July 3, 1986; amended at 10 Ill. Reg. 15110, effective September 5, 1986; amended at 10 Ill. Reg. 15631, effective September 19, 1986; amended at 11 Ill. Reg. 3150, effective February 6, 1987; amended at 11 Ill. Reg. 8712, effective April 20, 1987; amended at 11 Ill. Reg. 9919, effective May 15, 1987; emergency amendment at 11 Ill. Reg. 12441, effective July 10, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 20880, effective December 14, 1987; amended at 12 Ill. Reg. 867, effective January 1, 1988; amended at 12 Ill. Reg. 2137, effective January 11, 1988; amended at 12 Ill. Reg. 3497, effective January 22, 1988; amended at 12 Ill. Reg. 5642, effective March 15, 1988; amended at 12 Ill. Reg. 6151, effective March 22, 1988; amended at 12 Ill. Reg. 7687, effective April 22, 1988; amended at 12 Ill. Reg. 8662, effective May 13, 1988; amended at 12 Ill. Reg. 9023, effective May 20, 1988; amended at 12 Ill. Reg. 9669, effective May 24, 1988; emergency amendment at 12 Ill. Reg. 11828, effective July 1, 1988, for a maximum of 150 days; amended at 12 Ill. Reg. 14162, effective August 30, 1988; amended at 12 Ill. Reg. 17849, effective October 25, 1988; amended at 13 Ill. Reg. 63, effective January 1, 1989; emergency amendment at 13 Ill. Reg. 3402, effective March 3, 1989, for a maximum of 150 days; amended at 13 Ill. Reg. 6007, effective April 14, 1989; amended at 13 Ill. Reg. 12553, effective July 12, 1989; amended at 13 Ill. Reg. 13609, effective August 11, 1989; emergency amendment at 13 Ill. Reg. 14467, effective September 1, 1989, for a maximum of 150 days; emergency amendment at 13 Ill. Reg. 16154, effective October 2, 1989, for a maximum of 150 days; emergency expired March 1, 1990; amended at 14 Ill. Reg. 720, effective January 1, 1990; amended at 14 Ill. Reg. 6321, effective April 16, 1990; amended at 14 Ill. Reg. 13187, effective August 6, 1990; amended at 14 Ill. Reg. 14806, effective September 3, 1990; amended at 14 Ill.

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Reg. 16957, effective September 30, 1990; amended at 15 Ill. Reg. 277, effective January 1, 1991; emergency amendment at 15 Ill. Reg. 1111, effective January 10, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 5291, effective April 1, 1991; amended at 15 Ill. Reg. 5698, effective April 10, 1991; amended at 15 Ill. Reg. 7104, effective April 30, 1991; amended at 15 Ill. Reg. 11142, effective July 22, 1991; amended at 15 Ill. Reg. 11948, effective August 12, 1991; amended at 15 Ill. Reg. 14073, effective September 11, 1991; emergency amendment at 15 Ill. Reg. 15119, effective October 7, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 16709, effective November 1, 1991; amended at 16 Ill. Reg. 3468, effective February 20, 1992; amended at 16 Ill. Reg. 9986, effective June 15, 1992; amended at 16 Ill. Reg. 11565, effective July 15, 1992; emergency amendment at 16 Ill. Reg. 13641, effective September 1, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 14722, effective September 15, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 14722, effective September 15, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 17154, effective November 1, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 17764, effective November 13, 1992, for a maximum of 150 days; amended at 17 Ill. Reg. 827, effective January 15, 1993; amended at 17 Ill. Reg. 2263, effective February 15, 1993; amended at 17 Ill. Reg. 3202, effective February 26, 1993; amended at 17 Ill. Reg. 4322, effective March 22, 1993; amended at 17 Ill. Reg. 6804, effective April 21, 1993; amended at 17 Ill. Reg. 14612, effective August 26, 1993; amended at 18 Ill. Reg. 2018, effective January 21, 1994; amended at 18 Ill. Reg. 7759, effective May 5, 1994; amended at 18 Ill. Reg. 12818, effective August 5, 1994; amended at 19 Ill. Reg. 1082, effective January 25, 1995; amended at 19 Ill. Reg. 2875, effective February 24, 1995; amended at 19 Ill. Reg. 6639, effective May 5, 1995; emergency amendment at 19 Ill. Reg. 8403, effective June 9, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 8403, effective

## SUBPART A: GENERAL PROVISIONS

Section 113.1 Description of the Assistance Program  
EMERGENCY

The Aid to the Aged, Blind, or Disabled program provides--financial assistance, medical assistance and social services ~~available~~ to individuals who have been determined to be aged, blind or disabled as defined by the Social Security Administration. Financial aid is available under this program only for persons who are receiving Supplemental Security Income (SSI) or who have been found ineligible for SSI on the basis of income and who meet all other eligibility standards.

(Source: Emergency amendment at 19 Ill. Reg. 8403, effective June 9, 1995, for a maximum of 150 days)

## SUBPART B: NON-FINANCIAL FACTORS OF ELIGIBILITY

## Section 113.40 Blind

## DEPARTMENT OF PUBLIC AID

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EMERGENCY

- a) To be eligible for assistance as a blind person an individual must be determined blind as currently defined by the Social Security Administration (SSA). (See 20 CFR 416, Subpart I, April 1, 1984).
- b) If an individual is receiving Supplemental Security Income (SSI) or primary Social Security (OASDI) benefits, the Department shall accept the Social Security Administration (SSA) determination of blindness. ~~If an individual is applying for SSI, the Department shall not do a determination of blindness but shall accept the determination of SSA. (See Section 113-400 et seq. for eligibility for interim assistance in this situation.)~~ The Department will make the determination of blindness when the client has been denied SSI on the basis of too much income. The Department uses the same criteria for blindness as is used under SSI. (See 20 CFR 416, Subpart I, April 1, 1984).

c) Determination Process

- 1) If an individual receiving assistance is determined currently "not blind" by SSA under the SSI or primary OASDI programs, the Department shall accept SSA's determination of blindness and cancel the case, no matter which agency made the original determination of eligibility.
- 2) If the individual appeals the SSA determination of blindness to SSA, assistance shall be continued through the level of a determination by an Administrative Law Judge (ALJ) subject to the time limits of subsection (c)(3) below. If assistance has been cancelled but the client later appeals to SSA, the case shall be reinstated through the ALJ level subject to the time limits of subsection (c)(3) below.
- 3) If the client notifies the Department of his appeal to SSA within 10 days of the date of the Department notice, assistance will be continued with no break. If the client notifies the Department of his appeal to SSA within 11 through 65 days of the date of the Department notice, assistance will be reinstated back to the original date of cancellation. If the client notifies the Department of his appeal to SSA more than 65 days after the date of the Department notice, assistance will be provided prospectively only, unless the client actually appealed to SSA within 65 days of the date of the Department notice, in which case assistance will be reinstated back to the original date of cancellation.
- 4) If the client is continuing to receive SSI during the appeal process, the case shall be continued at the SSP level. ~~Otherwise, the case shall be placed on interim assistance.~~
- 5) If an Administrative Law Judge finds the individual "not blind", the Department shall accept that finding as final. The individual shall not have the right to appeal the determination of blindness to the Department at any time during this process.

- d) Redetermination of blindness is a condition of continuing eligibility

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

for individuals who are not applying for or receiving SSI or OASDI benefits.

- e) When appropriate, the Department shall pay for a medical examination to determine blindness.

(Source: Emergency amendment at 19 Ill. Reg. **8409**, effective June 9, 1995, for a maximum of 150 days)

**Section 113.50 Disabled**  
EMERGENCY

- a) To be eligible for assistance as a disabled person an individual must be determined disabled as currently defined by the Social Security Administration. (See 20 CFR 416, Subpart I, April 1, 1984).
- b) If an individual is receiving Supplemental Security Income (SSI) or primary Social Security (OASDI) benefits, the Department shall accept the Social Security Administration (SSA) determination of disability. ~~If an individual is applying for SSI, the Department shall not do a determination of disability but shall accept the determination of SSA. (See Section 113-400 et seq. for eligibility for interim assistance in this situation.)~~ The Department will make the determination of disability when the client has been denied SSI on the basis of too much income. The Department uses the same criteria for disability as is used under SSI. (See 20 CFR 416, Subpart I, April 1, 1984).

c) Determination Process

- 1) If an individual receiving assistance is determined currently "not disabled" by SSA under the SSI or primary OASDI programs, the Department shall accept SSA's determination of disability and cancel the case, no matter which agency made the original determination of eligibility.
- 2) If the individual appeals the SSA determination of disability to SSA, assistance shall be continued through the level of a determination by an Administrative Law Judge (ALJ) subject to the time limits of subsection (c)(3) below. If assistance has been cancelled but the client later appeals to SSA, the case shall be reinstated through the ALJ level subject to the time limits of subsection (c)(3) below.
- 3) If the client notifies the Department of his appeal to SSA within 10 days of the date of the Department notice, assistance will be continued with no break. If the client notifies the Department of his appeal to SSA within 11 through 65 days of the date of the Department notice, assistance will be reinstated back to the original date of cancellation. If the client notifies the Department of his appeal to SSA more than 65 days after the date of the Department notice, assistance will be provided prospectively only, unless the client actually appealed to SSA within 65 days of the date of the Department notice, in which case assistance will be reinstated back to the original date of



DEPARTMENT OF PUBLIC AID  
NOTICE OF EMERGENCY AMENDMENTS  
SUBPART F: INTERIM ASSISTANCE

5, 1995 for a maximum of 150 days)

Section 113.400 Description of the Interim Assistance Program  
EMERGENCY

- a) The Interim Assistance program provides -- financial and medical assistance available to individuals while an application for Supplemental Security Income (SSI) is pending if the Department determines that the individual will more likely than not be eligible for SSI.
- b) The Interim Assistance program is repealed effective September 1, 1995. Applications for financial assistance filed on or after July 1, 1995, shall not be considered under the Interim Assistance program.

(Source: Emergency amendment at 19 Ill. Reg. 8409, effective June 9, 1995, for a maximum of 150 days)

Section 113.405 Pending SSI Application (Repealed)  
EMERGENCY

- a) As a condition of eligibility, the individual must have filed an application for SSI and:
  - 1) the application is pending;
  - 2) the application was denied due to a finding of not blind or not disabled and an appeal of the decision is pending with SSA at the reconsideration or Administrative Law Judge (ALJ) level;
  - 3) the application has been approved for temporary SSI benefits or the application has been denied due to income and a determination of blindness or disability is pending with the Department;
  - 4) if the client is denied SSI due to a finding of not blind or not disabled and the client notifies the Department within 10 days of the date of the Department notice of termination that an appeal has been filed, assistance will be continued with no break if the client notifies the Department within 11 through 65 days after the date of notice of termination, assistance will be reinstated back to the date of the original cancellation if the client notifies the Department that an appeal has been filed more than 65 days from the date of notice of termination, assistance will be provided prospectively unless the client files the appeal within 65 days after the Department notifies in which case assistance will be reinstated back to the date of cancellation;
  - 5) if the Administrative Law Judge finds the individual not blind or not disabled, the Department shall accept the finding as final; the individual is then no longer eligible for interim assistance; the individual may appeal this determination only through an appeal of the Administrative Law Judge's decision within the Social Security

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- 4) If the client is continuing to receive SSI during the appeal process, the case shall be continued at the SSP level. Otherwise, the case shall be placed on interim assistance.
- 5) If an Administrative Law Judge finds the individual "not disabled", the Department shall accept that finding as final. The individual shall not have the right to appeal the determination of disability to the Department at any time during this process.
- d) Redetermination of disability is a condition of continuing eligibility for individuals who are not applying for or receiving SSI or OASDI benefits.

(Source: Emergency amendment at 19 Ill. Reg. 8409, effective June 9, 1995, for a maximum of 150 days)

SUBPART E: OTHER PROVISION

Section 113.330 Attorney's Fees for VA Appellants (Repealed)  
EMERGENCY

- a) The Department will pay any attorney or advocate working under the supervision of an attorney who represents a recipient of assistance to the Aged or Disabled (AABD) in an appeal of any claim for federal Veterans benefits before a hearing officer at a Veterans Administration Regional Office or upon an initial appeal to the Board of Veterans' Appeals which is decided in favor of the recipient. The amount of the payment will be 25% of the maximum federal Supplemental Security Income grant payable to the individual for a period of one (1) year.
- b) To secure payment, the attorney/advocate must submit his/her request for payment to the Illinois Department of Public Aid. The request for payment must be postmarked no more than sixty (60) days from the date of the notice of the favorable decision by the hearing officer. The following information must be included with the request:
  - 1) proof that the attorney/advocate represented the client;
  - 2) a copy of the favorable decision;
  - 3) the attorney/advocate's bill;
  - 4) the AABD recipient's name, address and Public Aid case number; and
  - 5) the attorney's/advocate's Federal Employee Identification Number or Social Security number.
- c) The Department will make payment within thirty (30) days of receipt of the information listed above.
- d) The attorney/advocate must agree to waive the right to charge or collect fees and expenses from the AABD recipient.

(Source: Emergency repealer at 19 Ill. Reg. 8409, effective June

## DEPARTMENT OF PUBLIC AID

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Administrations' appeal system:

- d) If an individual is determined eligible for SSI eligibility for Aid for the Aged, Blind or Disabled will be determined under 09-III-Adm-Code-113. Eligibility for Interim Assistance does not exist.

(Source: Emergency repealer at 19 Ill. Reg. 8409<sup>1</sup>, effective June 9, 1995, for a maximum of 150 days)

Section 113.410 More Likely Than Not Eligible for SSI (Repealed)EMERGENCY

- a) As a condition of eligibility, an applicant for Interim Assistance must be determined to be more likely than not to be found eligible for Supplemental Security Income (SSI).

- b) The determination will be made by medically qualified personnel who possess, at a minimum, a current Illinois license to practice as a Registered Nurse.

- c) The applicant must provide all relevant medical and social information as required by the Department. The determination will be made by a review of this relevant medical and social information. Referral and payment to medical providers will be made for relevant examinations and reports to make this determination when necessary and requested by the client. Medical transportation will also be provided if necessary and requested by the client.

- d) The Department has combined the determination of "more likely than not eligible for SSI" and the determination of whether a client is "not employable on the basis of a serious medical, physical or mental problem." The single standard has been developed based on the standard of "chronically needy" found in Section 6-110(f) of the Public Aid Code (Ill. Rev. Stat. 1991, Ch. 237, par. 6-110(f)).

- i) The determination is a rapid preliminary screening of the client's condition and is not meant to duplicate or even approximate the regular SSI determination done by the Department of Rehabilitation Bureau of Disability Determination Services.

- 2) The determination will be made by a review of medical and social information provided by the applicant. Review will be conducted based on the information available giving the benefit of any doubt due to lack of information to the client.

- 3) The determination will be made taking into consideration the individual's impairment level of functioning, age, education, work experience, and language capacity. Criteria used by the Bureau of Disability Determination Services to find a person automatically eligible for SSI will be used as a reference point in making the determination. All individuals who appear to meet that criteria will be automatically found to be probably eligible for SSI. The following additional and/or specific factors will also be given consideration in making the determinations:

- A) Significant evidence of mental illness or chronic substance

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

abuser:

- B) Beginning at age fifty, increasingly greater importance will be given to moderate illnesses as the individual becomes older.

- E) Lack of relevant work skills and/or recent work history. B) Inability or difficulty in reading or writing English. B) The possibility of development of further medical evidence (through SSI advocacy or other means) that will substantiate disabling conditions.

- e) An individual who has been denied SSI within the previous 12 months due to a finding of not blind or not disabled (either at the Administrative Law Judge level or above, or at a lower level if that determination was not appealed) cannot be determined more likely than not eligible for SSI unless the client shows there has been a substantial change in medical condition or there has been a substantial change in other factors such as age or work experience that make it more likely the individual would now be found eligible for SSI.

(Source: Emergency repealer at 19 Ill. Reg. 8409<sup>1</sup>, effective June 9, 1995, for a maximum of 150 days)

Section 113.415 Non-Financial Factors of Eligibility (Repealed)EMERGENCY

The following non-financial factors for Interim Assistance eligibility are the same as those for AABD eligibility:

- a) Client cooperation see 09-III-Adm-Code-113-9

- b) Citizenship see 09-III-Adm-Code-113-10

- c) Residence see 09-III-Adm-Code-113-20

- d) Institutional status see 09-III-Adm-Code-113-70

- e) Social Security Number see 09-III-Adm-Code-113-80

(Source: Emergency repealer at 19 Ill. Reg. 8409<sup>1</sup>, effective June 9, 1995, for a maximum of 150 days)

Section 113.420 Financial Factors of Eligibility (Repealed)EMERGENCY

The financial factors of Interim Assistance eligibility are the same as the financial factors for AABD eligibility (see Sections 113-100 through 113-160).

(Source: Emergency repealer at 19 Ill. Reg. 8409<sup>1</sup>, effective June 9, 1995, for a maximum of 150 days)

Section 113.425 Payment Levels for Chicago Interim Assistance Cases (Repealed)EMERGENCY



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- a) All Chicago Interim Assistance clients receive a flat grant of \$154.00 per month. In addition to the flat grant amount, clients may also be entitled to Special Needs allowances.
- b) The Special Needs allowances are as follows:

- 1) Telephone
- A) The monthly cost of a telephone is allowed at the minimum community rate when the client has no access to a telephone and the service is essential because of illness.
- B) No allowance is made for security deposits or past due bills.
- C) For installation charges see 99-111, Admin Code 116-520.
- 2) Laundry allowance of \$2.97 per month shall be provided when:
- A) Neither the client nor any member of the household is physically able to do the laundry; no relative is available and housekeeping services are not provided; or
- B) There are no facilities for washing or drying in the home; or
- C) A recipient in the home is incontinent or bedfast.
- 3) Shopping Allowance
- The Department shall provide an allowance for shopping service in an amount not to exceed \$4.66 when the client is unable to shop and there is no one available to do it without charge.
- 4) Therapeutic Diet Allowance
- A) The Department shall provide a therapeutic diet allowance when the diet is prescribed by a physician. Standard therapeutic diet monthly allowances provided are:

WYB-OP-BIBW	AMOUNT
Ulcer and other chronic conditions requiring a bland low residue diet)	\$ 5-55
Diabetic less than 1700 calories)	\$-7-39
Diabetic (1700 calories or more)	\$16-61
High protein-high caloric high vitamin	\$11-90

- B) Approval of an allowance in a different amount or for a non standard prescribed diet requires approval of the Department. Non standard diets are approved by the Bureau of Medical Practitioner Services on a case-by-case basis.
- 5) Restaurant Allowance
- The Department shall provide an allowance for meals in

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restaurants when the client has no facilities for the preparation of food, or is unable to cook, and has no one who will prepare meals:

- A) The maximum allowance for three meals per day seven days per week in a restaurant is \$59.61 monthly.
- B) When fewer than three meals per day are required to be eaten in a restaurant, the total restaurant allowance is to be authorized for the following monthly amounts:
- |              |         |
|--------------|---------|
| 1) Breakfast | \$11-92 |
| 2) Bunch     | \$17-09 |
| 3) Bunch     | \$29-01 |
- 6) Home-Delivered Meals
- The Department shall provide an allowance for home-delivered meals for clients who are confined to their homes because of illness or incapacity. Monthly allowances are as follows:

	5-Days-Per-Week	7-Days-Per-Week
1-Meal-Per-Day	\$12-77	\$17-91
Bunch-Only		
1-Meal-Per-Day	\$21-29	\$29-02
Bunch-Only		
2-Meals-Per-Day	\$34-06	\$47-69
Bunch-and-Buncher		
3-Meals-Per-Day	\$42-57	\$59-61
Breakfast, Bunch and-Buncher		

- 7) Special Allowances for Blind and Partially-Sighted (Interim Assistance-Blind-Only)
- Payment shall be made for reading or guide service for recreation (\$1.00 per month), repair of braille writers, radios or typewriters (most economical rate), food for a trained guide dog (\$12.19 per month) and allowance for attendance at the Illinois Visually-Handicapped Institute (\$19.58 per month for additional clothing and personal essentials for months the client is in attendance).

(Source: Emergency repealer at 19 Ill. Reg. 840.9, effective June 9, 1995, for a maximum of 150 days)

Section 113.430 Payment Levels for All Interim Assistance Cases Outside Chicago (Repealed)

## EMERGENCY

The payment levels for Interim Assistance cases outside Chicago are determined

## DEPARTMENT OF PUBLIC AID

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as follows:

- a) total-the-individual--allowances--used--in--determining--AABD--payment levels--(see--09--III--Adm--Code--113-246-through-113-261)--except--that individuals--receiving--Interim--Assistance--are--not--eligible--for--the grant-adjustment--(see--09--III--Adm--Code--113-253);
- b) Multiply--the--total--amount--of--the--individual--allowances--times--.068--Prop-cents;
- c) Subtract--the--amount--computed--in--step--(b)--from--the--total--amount--of--the individual--allowances--computed--in--step--(a)--This--total--is--the--Payment Level;

(Source: Emergency repealer at 19 Ill. Reg. 8409<sup>1</sup>, effective June 9, 1995, for a maximum of 150 days)

Section 113.435 Medical Eligibility (Repealed)EMERGENCY

- a) Individuals--receiving--Interim--Assistance--are--eligible--to--receive--the same--package--of--services--as--individuals--receiving--Aid--to--the--Aged, Blind--and--Disabled--(see--09--III--Adm--Code--140-3);
- b) Medical--eligibility--for--Interim--Assistance--cases--begins--the--earliest of--the--following--months--in--which--all--eligibility--requirements--are--met (see--09--III--Adm--Code--110-32):
- 1) the--third--month--before--the--month--of--application;
- 2) the--month--of--application;--or
- 3) the--first--month--eligibility--begins--following--the--month--of application;

- c) To--be--medically--eligible--means--that--all--eligibility--requirements--for Interim--Assistance--are--met--for--the--month--even--though--Interim Assistance--may--not--be--authorized--for--the--month--Services--prompted--by an--illness--or--accident--beginning--before--the--client--is--medically eligible--and--continuing--beyond--the--date--of--eligibility--are--payable on--a--prorated--basis--from--the--date--of--medical--eligibility--forward;

(Source: Emergency repealer at 19 Ill. Reg. 8409<sup>1</sup>, effective June 9, 1995, for a maximum of 150 days)

Section 113.440 Attorney's Fees for SSI Applicants (Repealed)EMERGENCY

- a) The--Department--will--pay--any--attorney--or--advocate--working--under--the supervision--of--an--attorney--who--represents--a--recipient--of--Interim Assistance--(Aged--Blind--or--Disabled)--in--an--appeal--of--any--claim--for Supplemental--Security--Income--(SSI)--benefits--before--an--Administrative Law--Judge--which--is--decided--in--favor--of--the--recipient--The--amount--of the--payment--will--be--25%--of--the--maximum--SSI--grant--payable--to--the individual--for--a--period--of--one--(1)--year;

b)

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- 1) To--secure--payment--the--attorney/advocate--must--submit--his/her request--for--payment--to--the--Illinois--Department--of--Public--Aid--the request--for--payment--must--be--postmarked--no--more--than--sixty (60)--days--from--the--date--of--the--notice--of--the--favorable--decision by--the--Administrative--Law--Judge--The--following--information--must be--included--with--the--request:

- A) proof--that--the--attorney/advocate--represented--the--client;
- B) a--copy--of--the--favorable--decision;
- C) the--attorney's/advocate's--bill;
- B) the--Interim--Assistance--recipient's--name--address--and--Public Aid--case--number;--and
- E) the--attorney's/advocate's--Federal--Employee--Identification number--or--Social--Security--number;
- 2) the--Department--will--make--payment--within--thirty--(30)--days--of receipt--of--the--information--listed--above;
- c) the--attorney/advocate--must--agree--to--waive--the--right--to--charge--or collect--fees--and--expenses--from--the--Interim--Assistance--recipient;

(Source: Emergency repealer at 19 Ill. Reg. 8409<sup>1</sup>, effective June 9, 1995, for a maximum of 150 days)

Section 113.445 Advocacy Program for Persons Receiving Interim Assistance (Repealed)EMERGENCY

- a) the--Department--shall--establish--advocacy--programs--to--help--clients pursue--SSI--applications--and--for--those--found--ineligible--for--SSI initially--to--help--clients--pursue--the--SSI--reconsideration--and--appeal process--These--programs--may--be--limited--to--specific--geographic--areas; For--those--geographic--areas--of--the--State--where--an--advocacy--program--is established--it--shall--be--a--condition--of--eligibility--for--Interim Assistance--for--the--client--to--participate--in--and--cooperate--with--the advocacy--program;
- b) Responsibilities--of--SSI--advocacy--programs--include--but--are--not--limited to:

- 1) Assisting--the--client--in--completing--all--forms--required--for--the--SSI process;
- 2) Assisting--the--client--in--securing--and--providing--all--medical information--required--for--the--SSI--process;
- 3) Ensuring--that--the--client--attends--all--scheduled--SSI--appointments including--issuing--car--fare--or--arranging--for--other--transportation when--necessary;
- 4) Contacting--the--Social--Security--Administration--(SSA)--to--request rescheduling--of--a--client--appointment--when--required;
- 5) Maintaining--contact--with--the--SSA--regarding--the--status--of--the--SSI application;
- 6) Documenting--all--contacts--with--the--client--or--SSA;
- 7) Initiating--the--SSI--appeal/reconsideration--process--if--the--SSI



## DEPARTMENT OF PUBLIC AID

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application--is--denied--through--the--Administrative--Law--Judge  
Bevel;

- 8) Referring the case for assistance under the Aid to the Aged, Blind or Disabled (AABD) program upon approval of the SSI application and advising the GA office to cancel the GA case;  
9) Follow up after a decision by the Administrative Law Judge including obtaining a copy of the decision and referring the case for appropriate re-evaluation in the case of a decision by the Administrative Law Judge that the client is not disabled or blind; and  
10) Maintaining statistics on case referrals, actions taken and dispositions.

(Source: Emergency repealer at 19 Ill. Reg. 8409, effective June 9, 1995, for a maximum of 150 days)

# Section 113.450 Limitation on Amount of Interim Assistance to Recipients from Other States (Repealed)

## EMERGENCY

if an applicant has moved to Illinois from another state and received financial assistance in that state under a program that is equivalent to the interim Assistance program during any of the twelve months immediately preceding the date the applicant's current Illinois residency began, during the first twelve months that the applicant resides in Illinois the applicant is eligible to receive assistance in an amount no greater than the amount of comparable assistance received from the other state.

(Source: Emergency repealer at 19 Ill. Reg. 8409, effective June 9, 1995, for a maximum of 150 days)

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

1) Heading of the Part: Application Process

2) Code Citation: 89 Ill. Adm. Code 110

3) Section Numbers: Emergency Action:

110.32 Amendment

110.36 Amendment

4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, par. 3-1a et seq.)(305 ILCS 5/3-1a) and Public Act 89-21.

5) Effective Date of Amendments: June 9, 1995

6) If these Emergency Amendments are to expire before the end of the 150-day period, please specify the date on which it is to expire: Not Applicable

7) Date Filed in Agency's Principal Office: June 9, 1995

8) Reason for Emergency: This rulemaking is necessary to comply with provisions of Public Act 89-21 which require the Department of Public Aid to abolish the Interim Assistance program effective September 1, 1995. These emergency amendments are necessary to establish procedures for applications filed on or after July 1, 1995, and to provide for persons receiving Interim Assistance before September 1, 1995. Section 10-95 of Public Act 89-21 specifically allows the Department to implement the changes made by that amendatory Act through the use of Emergency Rulemaking.

9) Complete Description of the Subjects and Issues Involved: Pursuant to Public Act 89-21, the Department is making the following changes in the Interim Assistance and Transitional Assistance programs. These emergency amendments are necessary to establish procedures for applications filed on or after July 1, 1995, and to provide for persons receiving Interim Assistance before September 1, 1995. In related rulemaking, changes in the Interim Assistance program are being proposed in 89 Ill. Adm. Code 113 and 114.

1. The Interim Assistance program is being abolished effective September 1, 1995. Persons receiving Interim Assistance will continue to do so through August 31, 1995, unless otherwise cancelled under the eligibility requirements of the program. Applications for assistance filed on or after July 1, 1995, will not be considered under the Interim Assistance program but instead will be considered under the Transitional Assistance program. All Interim Assistance cases will be cancelled effective September 1, 1995. Persons cancelled can apply for Transitional Assistance.

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

2. The eligibility criteria for the Transitional Assistance program is being revised effective July 1, 1995. The following categories are eliminated as categories of eligibility: a) serious medical, physical or mental problem which prevents the client from working; b) lack of a high school diploma or GED, earnings of less than \$2,000 in the last year, lack of earnings of \$200 or more in three of the last 24 months and inability to read English at the 5.9 grade level; c) addictive drug or alcohol abuse problem which prevents the client from working.

3. Effective July 1, 1995, clients who apply for Transitional Assistance who claim to be disabled and unable to work and are awaiting a determination of eligibility for Supplemental Security Income (SSI) will be considered for eligibility under a new category. The Department will make a determination of disability for these persons. The determination of disability will use the same criteria as used by the Social Security Administration under the SSI program. If found disabled, the client will be eligible for cash benefits under Transitional Assistance, except as noted below. In addition, the client will be eligible for medical assistance under the Social Security Act due to the Department's determination of disability. If the client is not disabled, the client is ineligible for Transitional Assistance unless eligible under one of the other six remaining categories. If eligible for Transitional Assistance under one of the other six categories, the client will be eligible for medical assistance under the more restrictive General Assistance medical program.

4. Individuals determined disabled whose disability is based solely on substance additions (drug abuse and alcoholism) and whose disability would cease were their additions to end will be eligible for medical assistance only and will not receive a cash grant.

5. The Payment Level for Transitional Assistance is being reduced to \$60 per month effective July 1, 1995. This amount will be effective in the City of Chicago, where the Transitional Assistance program is administered by the Department of Public Aid, as well as all local governmental units receiving State funds outside the City of Chicago, where the Transitional Assistance program is administered by the local governmental units. Public Act 89-21 allows the Department to reduce Transitional Assistance cash grants during the fiscal year in order to keep spending within the amount appropriated. If necessary, appropriate changes will be made to Sections 114.351, 114.352 and 114.353.

6. The SSI Advocacy program is retained, though its reference is moved from the Sections on Interim Assistance to the Sections on Transitional Assistance. Individuals determined disabled whose disability is based solely on substance additions will not be

## DEPARTMENT OF PUBLIC AID

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referred to the SSI Advocacy Program.

7. Payment of attorney's fees for the successful representation of SSI and VA applicants before an Administrative Law Judge is retained for clients who receive cash assistance under a General Assistance program administered by the Department of Public Aid. Attorney's fees will not be paid for individuals determined disabled whose disability is based solely on substance additions, nor for individuals who receive an award for both SSI and SSA benefits.

10) Are there any Proposed Amendments pending to this Part? No

11) Statement of Statewide Policy Objectives: These emergency amendments do not affect units of local government.

12) Information and questions regarding these Emergency Amendments shall be directed to:

Judy Umunna  
Bureau of Rules and Regulations  
Illinois Department of Public Aid  
100 South Grand Avenue East, Third Floor  
Springfield, Illinois 62762  
(217) 524-3215

The full text of the Emergency Amendments begins on the next page:



## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

TITLE 89: SOCIAL SERVICES  
CHAPTER I: DEPARTMENT OF PUBLIC AID  
SUBCHAPTER b: ASSISTANCE PROGRAMS

PART 110  
APPLICATION PROCESS

Section  
110.1 Incorporation By Reference  
110.10 Application For Assistance  
110.15 Local Office Action On Application for Public Assistance  
110.20 Time Limitations On The Disposition Of An Application  
110.30 Approval of An Application And Initial Authorization of Financial Assistance

110.32 ~~Approval-of--An--Application--and~~ Initial Authorization of Medical Assistance (MAG)

EMERGENCY

110.34 Approval of An Application and Initial Authorization of Medical Assistance - (MANG)

110.36 ~~Approval-of--An--Application--and~~ Initial Authorization of General Assistance ~~Medical and Aid-to-the-Medically-Indigent~~

EMERGENCY

110.38 General Assistance and Aid to the Medically Indigent Special Approval Provisions

110.40 Denial Of An Application

AUTHORITY: Implementing Articles III, IV, V, VI and VII and authorized by Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, pars. 3-1 et seq., 4-1 et seq., 5-1 et seq., 6-1 et seq., 7-1 et seq., and 12-13) [305 ILCS 5/Arts. III, IV, V, VI, VII and 12-13].

SOURCE: Filed and effective December 30, 1977; emergency amendment at 2 Ill. Reg. 44, p. 167, effective October 19, 1978, for a maximum of 150 days; amended at 3 Ill. Reg. 5, p. 875, effective February 2, 1979; amended at 3 Ill. Reg. 44, p. 173, effective October 19, 1979; amended at 6 Ill. Reg. 8125, effective July 1, 1982; codified at 7 Ill. Reg. 5195; amended at 8 Ill. Reg. 6760, effective May 3, 1984; amended at 9 Ill. Reg. 6798, effective April 30, 1985; amended at 9 Ill. Reg. 13087, effective August 16, 1985; amended at 12 Ill. Reg. 11457, effective July 1, 1988; amended at 13 Ill. Reg. 3836, effective March 10, 1989; amended at 13 Ill. Reg. 10628, effective June 22, 1989; amended at 14 Ill. Reg. 13198, effective August 6, 1990; amended at 16 Ill. Reg. 16618, effective October 23, 1992; amended at 17 Ill. Reg. 640, effective December 31, 1992; emergency amendment at 19 Ill. Reg. **8429** effective June 9, 1995, for a maximum of 150 days.

Section 110.32 ~~Approval-of--An--Application--and~~ Initial Authorization of Medical Assistance (MAG)

EMERGENCY

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## NOTICE OF EMERGENCY AMENDMENTS

Medical Assistance (MAG) (for Aid to the Aged, Blind or Disabled and Aid to Families with Dependant Children) and medical assistance for General Assistance clients determined by the Department to be disabled shall be authorized, dependent on the specific case situation, effective:

- a) The first day of the month of application, providing the client was eligible that month, or
- b) The first day of the month of initial eligibility subsequent to the month of application, or
- c) The first day of each month within the 3 months prior to the date of application. The applicant must be both categorically and financially eligible for the month or months ~~month(s)~~ for which medical need has been established. The months of retroactive medical eligibility may be noncontinuous.

(Source: Emergency amendment at 19 Ill. Reg. **8429**, effective June 9, 1995, for a maximum of 150 days)

Section 110.36 ~~Approval-of--An--Application--and~~ Initial Authorization of General Assistance Medical and Aid-to-the-Medically-Indigent EMERGENCY

General Assistance (GA) medical assistance, except for clients determined by the Department to be disabled, ~~and Aid-to-the-Medically-Indigent--(AMI)~~ shall be authorized, dependent on the specific case situation, effective:

- a) The first day of the month of application providing the client was eligible that month; or
- b) The first day of the month immediately prior to the month of application; or
- c) The first day of the month of initial eligibility subsequent to the month in which application is made.

(Source: Emergency amendment at 19 Ill. Reg. **8429**, effective June 9, 1995, for a maximum of 150 days)

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- 1) Heading of the Part: General Assistance
- 2) Code Citation: 89 Ill. Adm. Code 114
- 3) Section Number:           Emergency Action:

114.1, 114.2	Amendment
114.3	New Section
114.351, 114.352, 114.353	Amendment
114.402, 114.440	Amendment
114.442	New Section
- 4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, Ch. 23, par. 12-13)(305 ILCS 5/12-13) and Public Act 89-21.
- 5) Effective Date of Amendments: June 9, 1995
- 6) If these Emergency Amendments are to expire before the end of the 150-day period, please specify the date on which it is to expire: Not Applicable
- 7) Date Filed in Agency's Principal Office: June 9, 1995
- 8) Reason for Emergency: This rulemaking is necessary to comply with provisions of Public Act 89-21 which require the Department of Public Aid to abolish the interim assistance program effective September 1, 1995. These emergency amendments are necessary to establish procedures for applications filed on or after July 1, 1995, and to provide for persons receiving Interim Assistance before September 1, 1995. Section 10-95 of Public Act 89-21 specifically allows the Department to implement the changes made by that amendatory Act through the use of Emergency Rulemaking.

- 9) Complete Description of the Subjects and Issues Involved: Pursuant to Public Act 89-21, the Department is making the following changes in the Interim Assistance and Transitional Assistance programs. These emergency amendments are necessary to establish procedures for applications filed on or after July 1, 1995, and to provide for persons receiving Interim Assistance before September 1, 1995. Related changes in the Interim Assistance program are being proposed in 89 Ill. Adm. Code 113. There are also some changes being proposed in 89 Ill. Adm. Code 110 that relate to these programs.

1. The Interim Assistance program is being abolished effective September 1, 1995. Persons receiving Interim Assistance will continue to do so through August 31, 1995, unless otherwise cancelled under the eligibility requirements of the program. Applications for assistance filed on or after July 1, 1995, will not be considered under the

## DEPARTMENT OF PUBLIC AID

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- Interim Assistance program but instead will be considered under the Transitional Assistance program. All Interim Assistance cases will be cancelled effective September 1, 1995. Persons cancelled can apply for Transitional Assistance.
2. The eligibility criteria for the Transitional Assistance program is being revised effective July 1, 1995. The following categories are eliminated as categories of eligibility: a) serious medical, physical or mental problem which prevents the client from working; b) lack of a high school diploma or GED, earnings of less than \$2,000 in the last year, lack of earnings of \$200 or more in three of the last 24 months and inability to read English at the 5.9 grade level; c) addictive drug or alcohol abuse problem which prevents the client from working.
3. Effective July 1, 1995, clients who apply for Transitional Assistance who claim to be disabled and unable to work and are awaiting a determination of eligibility for Supplemental Security Income (SSI) will be considered for eligibility under a new category. The Department will make a determination of disability for these persons. The determination of disability will use the same criteria as used by the Social Security Administration under the SSI program. If found disabled, the client will be eligible for cash benefits under Transitional Assistance, except as noted below. In addition, the client will be eligible for medical assistance under the Social Security Act due to the Department's determination of disability. If the client is not disabled, the client is ineligible for Transitional Assistance unless eligible under one of the other six remaining categories. If eligible for Transitional Assistance under one of the other six categories, the client will be eligible for medical assistance under the more restrictive General Assistance medical program.
4. Individuals determined disabled whose disability is based solely on substance addictions (drug abuse and alcoholism) and whose disability would cease were their addictions to end will be eligible for medical assistance only and will not receive a cash grant.
5. The Payment Level for Transitional Assistance is being reduced to \$60 per month effective July 1, 1995. This amount will be effective in the City of Chicago, where the Transitional Assistance program is administered by the Department of Public Aid, as well as all local governmental units receiving State funds outside the City of Chicago, where the Transitional Assistance program is administered by the local governmental units. Public Act 89-21 allows the Department to reduce Transitional Assistance cash grants during the fiscal year in order to keep spending within the amount appropriated. If necessary, appropriate changes will be made to Sections 114.351, 114.352 and 114.353.



DEPARTMENT OF PUBLIC AID  
NOTICE OF EMERGENCY AMENDMENTS

DEPARTMENT OF PUBLIC AID  
NOTICE OF EMERGENCY AMENDMENTS

TITLE 89: SOCIAL SERVICES  
CHAPTER I: DEPARTMENT OF PUBLIC AID  
SUBCHAPTER b: ASSISTANCE PROGRAMS

6. The SSI Advocacy program is retained, though its reference is moved from the Sections on Interim Assistance to the Sections on Transitional Assistance. Individuals determined disabled whose disability is based solely on substance additions will not be referred to the SSI Advocacy Program.

PART 114  
GENERAL ASSISTANCE

7. Payment of attorney's fees for the successful representation of SSI and VA applicants before an Administrative Law Judge is retained for clients who receive cash assistance under a General Assistance program administered by the Department of Public Aid. Attorney's fees will not be paid for individuals determined disabled whose disability is based solely on substance additions, nor for individuals who receive an award for both SSI and SSA benefits.

SUBPART A: GENERAL PROVISIONS

Section	Description of the Assistance Program
114.1	Description of the Assistance Program
114.2	Determination of Not Employable

EMERGENCY	Advocacy Program for Persons Receiving State Transitional Assistance
114.3	Incorporation By Reference
114.5	

SUBPART B: NON-FINANCIAL FACTORS OF ELIGIBILITY

Section	Client Cooperation
114.9	Citizenship
114.10	Residence
114.20	Age
114.30	Relationship
114.40	Living Arrangement
114.50	Social Security Numbers
114.52	Work Registration Requirements (Outside City of Chicago only)
114.60	Individuals Exempt From Work Registration Requirements (Outside City of Chicago only)
114.61	Job Service Registration (Outside City of Chicago only)
114.62	Failure to Maintain Current Job Service Registration (Outside City of Chicago only)
114.63	Responsibility to Seek Employment (Outside City of Chicago only)
114.64	Initial Employment Expenses (Outside City of Chicago only)
114.70	Downstate General Assistance Work and Training Programs
114.80	Downstate General Assistance - Food Stamps Employment and Training
114.85	Pilot Project
114.90	Project Chance Participation/Cooperation Requirements (Renumbered)
114.100	General Assistance Jobs Program (Repealed)

SUBPART C: PROJECT ADVANCE

Section	Project Advance
114.108	Project Advance Participation Requirements of Adjudicated Fathers
114.109	

10) Are there any Proposed Amendments pending to this Part? No

11) Statement of Statewide Policy Objectives: These emergency amendments do not affect units of local government.

12) Information and questions regarding these Emergency Amendments shall be directed to:

Name: Judy Umunna  
Address: Bureau of Rules and Regulations  
Illinois Department of Public Aid  
100 South Grand Avenue East, Third Floor  
Springfield, Illinois 62762  
Telephone: (217) 524-3215

The full text of the Emergency Amendments begins on the next page:

DEPARTMENT OF PUBLIC AID  
NOTICE OF EMERGENCY AMENDMENTS

Section	Application And/Or Date of Decision
114.228	Initial Employment
114.229	Termination of Employment
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**AUTHORITY:** Implementing Article VI and authorized by Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, pars. 6-1 et seq. and 12-13) [305 ILCS 5/Art. VI and 12-13]

**SOURCE:** Filed effective December 30, 1977; peremptory amendment at 2 Ill. Reg. 17, p. 117, effective February 1, 1978; amended at 2 Ill. Reg. 31, p. 134, effective August 5, 1978; emergency amendment at 2 Ill. Reg. 37, p. 4, effective August 30, 1978, for a maximum of 150 days; peremptory amendment at 2 Ill. Reg. 46, p. 44, effective November 1, 1978; peremptory amendment at 2 Ill. Reg. 46, p. 56, effective November 1, 1978; emergency amendment at 3 Ill. Reg. 16, p. 41, effective April 9, 1979, for a maximum of 150 days; emergency amendment at 3 Ill. Reg. 28, p. 182, effective July 1, 1979, for a maximum of 150 days; amended at 3 Ill. 33, p. 399, effective August 18, 1979; amendment at 3 Ill. Reg. 33, p. 415, effective August 18, 1979; amended at 3 Ill. Reg. 38, p. 243, effective September 21, 1979, peremptory amendment at 3 Ill. Reg. 38, p. 321, effective September 7, 1979; amended at 3 Ill. Reg. 40, p. 140, effective October 6, 1979; amended at 3 Ill. Reg. 46, p. 36, effective November 2, 1979; amended at 3 Ill. Reg. 47, p. 96, effective November 13, 1979; amended at 3 Ill. Reg. 48, p. 1, effective November 15, 1979; peremptory amendment at 4 Ill. Reg. 9, p. 259, effective February 22, 1980; amended at 4 Ill. Reg. 10, p.

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258, effective February 25, 1980; amended at 4 Ill. Reg. 12, p. 551, effective March 10, 1980; amended at 4 Ill. Reg. 27, p. 387, effective June 24, 1980; emergency amendment at 4 Ill. Reg. 29, p. 294, effective July 8, 1980, for a maximum of 150 days; amended at 4 Ill. Reg. 37, p. 797, effective September 2, 1980; amended at 4 Ill. Reg. 37, p. 800, effective September 2, 1980; amended at 4 Ill. Reg. 45, p. 134, effective October 27, 1980; amended at 5 Ill. Reg. 766, effective January 2, 1981; amended at 5 Ill. Reg. 1134, effective January 26, 1981; peremptory amendment at 5 Ill. Reg. 5722, effective June 1, 1981; amended at 5 Ill. Reg. 7071, effective June 23, 1981; amended at 5 Ill. Reg. 7104, effective June 23, 1981; amended at 5 Ill. Reg. 8041, effective July 27, 1981; amended at 5 Ill. Reg. 8052, effective July 24, 1981; peremptory amendment at 5 Ill. Reg. 8106, effective August 1, 1981; peremptory amendment at 5 Ill. Reg. 10062, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10079, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10095, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10113, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10124, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 10131, effective October 1, 1981; amended at 5 Ill. Reg. 10730, effective October 1, 1981; amended at 5 Ill. Reg. 10733, effective October 1, 1981; amended at 5 Ill. Reg. 10760, effective October 1, 1981; amended at 5 Ill. Reg. 10767, effective October 1, 1981; peremptory amendment at 5 Ill. Reg. 11647, effective October 16, 1981; peremptory amendment at 6 Ill. Reg. 611, effective January 1, 1982; amended at 6 Ill. Reg. 1216, effective January 14, 1982; emergency amendment at 6 Ill. Reg. 2447, effective March 1, 1982, for a maximum of 150 days; peremptory amendment at 6 Ill. Reg. 2452, effective February 11, 1982; peremptory amendment at 6 Ill. Reg. 6475, effective May 18, 1982; peremptory amendment at 6 Ill. Reg. 6912, effective May 20, 1982; emergency amendment at 6 Ill. Reg. 7299, effective June 2, 1982, for a maximum of 150 days; amended at 6 Ill. Reg. 8115, effective July 1, 1982; amended at 6 Ill. Reg. 8142, effective July 1, 1982; amended at 6 Ill. Reg. 8159, effective July 1, 1982; amended at 6 Ill. Reg. 10970, effective August 26, 1982; amended at 6 Ill. Reg. 11921, effective September 21, 1982; amended at 6 Ill. Reg. 12293, effective October 1, 1982; amended at 6 Ill. Reg. 12318, effective October 1, 1982; amended at 6 Ill. Reg. 13754, effective November 1, 1982; rules repealed, new rules adopted and codified at 7 Ill. Reg. 907, effective January 7, 1983; amended (by adding sections being codified with no substantive change) at 7 Ill. Reg. 5195; amended at 7 Ill. Reg. 9909, effective August 5, 1983; amended (by adding section being codified with no substantive change) at 7 Ill. Reg. 14747; amended (by adding section being codified with no substantive change) at 7 Ill. Reg. 16107; amended at 7 Ill. Reg. 16408, effective November 30, 1983; amended at 7 Ill. Reg. 16652, effective December 1, 1983; amended at 8 Ill. Reg. 243, effective December 27, 1983; amended at 8 Ill. Reg. 5233, effective April 9, 1984; amended at 8 Ill. Reg. 6764, effective April 27, 1984; amended at 8 Ill. Reg. 11435, effective June 27, 1984; amended at 8 Ill. Reg. 13319, effective July 16, 1984; amended at 8 Ill. Reg. 16237, effective August 24, 1984; amended (by adding sections being codified with no substantive change) at 8 Ill. Reg. 17896; amended at 9 Ill. Reg. 314, effective January 1, 1985; emergency amendment at 9 Ill. Reg. 823, effective January 3, 1985, for a maximum of 150

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days; amended at 9 Ill. Reg. 9557, effective June 5, 1985; amended at 9 Ill. Reg. 10764, effective July 5, 1985; amended at 9 Ill. Reg. 15800, effective October 16, 1985; amended at 10 Ill. Reg. 1924, effective January 17, 1986; amended at 10 Ill. Reg. 3660, effective January 30, 1986; emergency amendment at 10 Ill. Reg. 4646, effective February 3, 1986, for a maximum of 150 days; amended at 10 Ill. Reg. 4896, effective March 7, 1986; amended at 10 Ill. Reg. 10581, effective June 3, 1986; amended at 10 Ill. Reg. 11041, effective June 5, 1986; amended at 10 Ill. Reg. 12562, effective July 14, 1986; amended at 10 Ill. Reg. 15118, effective September 5, 1986; amended at 10 Ill. Reg. 15640, effective September 19, 1986; amended at 10 Ill. Reg. 19079, effective October 24, 1986; amended at 11 Ill. Reg. 2307, effective January 16, 1987; amended at 11 Ill. Reg. 5297, effective March 11, 1987; amended at 11 Ill. Reg. 6238, effective March 20, 1987; emergency amendment at 11 Ill. Reg. 12449, effective July 10, 1987, for a maximum of 150 days; emergency amendment at 11 Ill. Reg. 12948, effective August 1, 1987, for a maximum of 150 days; emergency amendment at 11 Ill. Reg. 18311, effective November 1, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 18689, effective November 1, 1987; emergency amendment at 11 Ill. Reg. 18791, effective November 1, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 20129, effective December 4, 1987; amended at 11 Ill. Reg. 20889, effective December 14, 1987; amended at 12 Ill. Reg. 889, effective January 1, 1988; SUBPARTS C, D and E recodified to SUBPARTS E, F and G at 12 Ill. Reg. 2147; Section 114.110 recodified to Section 114.52 at 12 Ill. Reg. 2984; amended at 12 Ill. Reg. 3505, effective January 22, 1988; amended at 12 Ill. Reg. 6170, effective March 18, 1988; amended at 12 Ill. Reg. 6719, effective March 22, 1988; amended at 12 Ill. Reg. 9108, effective May 20, 1988; amended at 12 Ill. Reg. 9699, effective May 24, 1988; amended at 12 Ill. Reg. 9940, effective May 31, 1988; amended at 12 Ill. Reg. 11474, effective June 30, 1988; amended at 12 Ill. Reg. 14255, effective August 30, 1988; emergency amendment at 12 Ill. Reg. 14364, effective September 1, 1988, for a maximum of 150 days; amendment at 12 Ill. Reg. 16729, effective September 30, 1988; amended at 12 Ill. Reg. 20171, effective November 28, 1988; amended at 13 Ill. Reg. 89, effective January 1, 1989; amended at 13 Ill. Reg. 1546, effective January 20, 1989; amended at 13 Ill. Reg. 3900, effective March 10, 1989; amended at 13 Ill. Reg. 8580, effective May 20, 1989; emergency amendment at 13 Ill. Reg. 16169, effective October 2, 1989, for a maximum of 150 days; emergency expired March 1, 1990; amended at 13 Ill. Reg. 16015, effective October 6, 1989; amended at 14 Ill. Reg. 746, effective January 1, 1990; amended at 14 Ill. Reg. 3640, effective February 23, 1990; amended at 14 Ill. Reg. 5360, effective April 16, 1990; amended at 14 Ill. Reg. 10929, effective June 20, 1990; amended at 14 Ill. Reg. 13215, effective August 6, 1990; amended at 14 Ill. Reg. 13777, effective August 10, 1990; amended at 14 Ill. Reg. 14162, effective August 17, 1990; amended at 14 Ill. Reg. 17111, effective September 30, 1990; amended at 15 Ill. Reg. 288, effective January 1, 1991; amended at 15 Ill. Reg. 5710, effective April 10, 1991; amended at 15 Ill. Reg. 11164, effective August 1, 1991; emergency amendment at 15 Ill. Reg. 15144, effective October 7, 1991, for a maximum of 150 days; amended at 16 Ill. Reg. 3512, effective February 20, 1992; emergency amendment at 16 Ill. Reg. 4540, effective March 10, 1992, for a maximum of 150 days; emergency amendment at 16

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111. Reg. 11662, effective July 1, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 13297, effective August 15, 1992; emergency amendment at 16 Ill. Reg. 13651, effective September 1, 1992, for a maximum 150 days; emergency amendment at 16 Ill. Reg. 14769, effective September 15, 1992, for a maximum of 150 days; emergency amended at 16 Ill. Reg. 17772, effective November 13, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 18815, effective November 13, 1992, 24, 1992; amended at 17 Ill. Reg. 1091, effective January 15, 1993; amended at 16 Ill. Reg. 18815, effective November 24, 1992; amended at 17 Ill. Reg. 1091, effective January 15, 1993; amended at 17 Ill. Reg. 2277, effective February 15, 1993; amended at 17 Ill. Reg. 3255, effective March 1, 1993; amended at 17 Ill. Reg. 3639, effective February 26, 1993; amended at 17 Ill. Reg. 3255, effective March 1, 1993; amended at 17 Ill. Reg. 6814, effective April 21, 1993; emergency amendment at 17 Ill. Reg. 19728, effective November 1, 1993, for a maximum of 150 days; amended at 18 Ill. Reg. 3436, effective February 28, 1994; amended at 18 Ill. Reg. 7390, effective April 29, 1994; amended at 18 Ill. Reg. 12839, effective August 5, 1994; emergency amendment at 19 Ill. Reg. 18434, effective June 9, 1995, for a maximum of 150 days.

## SUBPART A: GENERAL PROVISIONS

### Section 114.1 Description of the Assistance Program

#### EMERGENCY

- a) The General Assistance program provides--financial and medical assistance ~~available~~ to eligible needy families or individuals who are ineligible to receive assistance through a categorical or Federal Assistance Program. See-89-111-Adm-Code-140:5-5-for-covered-medical services.
- b) General Assistance is provided to eligible families and to pregnant women, as defined in Section 114.400, through the Family and Children Assistance program. Assistance is provided without regard to any limitation on the number of months an eligible family or pregnant woman may receive such benefits.
- c) For Fiscal Year 1992 (July 1, 1991 through June 30, 1992), General Assistance is provided to individual adults, as defined in 89 Ill. Adm. Code 114.400, through the Transitional Assistance program, with the following limitations:
  - 1) Individuals receiving Transitional Assistance may only receive such assistance for nine calendar months. Receipt of General Assistance or Transitional Assistance for any month in Fiscal Year 1992 (July 1991 through June 1992), shall count towards this limitation.
  - 2) Transitional Assistance shall not be continued pending a final decision in an appeal past the nine month limitation in subsection (c)(1) above, under any circumstances, unless the client has appealed a determination of employability on a timely basis and the hearing is pending on the date the nine month limitation would become effective for that client.



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- 3) Notwithstanding subsection (c)(1) above, eligible individuals may qualify for Transitional Assistance without regard to any limitations on the number of months of eligibility during any time period if the individual is determined to be not employable pursuant to Section 114.2.
- d) Effective July 1, 1995 1992, General Assistance is provided to individual adults, as defined in Section 114.400, through the Transitional Assistance program only for those individuals determined to be not employable pursuant to Section 114.2 and only for those months that the client is considered not employable pursuant to Section 114.2.
- e) Individuals determined to be not employable under Section 114.2(b)(1) whose disability is based solely on substance addictions (drug abuse and alcoholism) and whose disability would cease were their addictions to end shall not be eligible for cash benefits, but shall only be eligible for medical assistance.
- f) Individuals determined to be not employable under Section 114.2(b)(1) shall be entitled to medical services under 89 Ill. Adm. Code 140.3. All other General Assistance recipients shall be entitled to medical services under 89 Ill. Adm. Code 140.5.

(Source: Emergency amendment at 19 Ill. Reg. 8434, effective June 9, 1995, for a maximum of 150 days)

**Section 114.2 Determination of Not Employable****EMERGENCY**

- a) Unless determined not employable pursuant to this Section, a client shall be considered employable.
- b) A client shall be determined not employable if determined to meet one of the following criteria:
- 1) Disabled as determined by the Department, using the same criteria as the Social Security Administration (SSA) under the Supplemental Security Income (SSI) program (see 20 CFR 416, Subpart I, April 1, 1994) in accordance with the provisions of this subsection (b)(1).
  - A) As a condition of eligibility, the individual must have filed an application for SSI and:
    - i) The application is pending;
    - ii) The application was denied due to a finding of not blind or not disabled and an appeal of the decision is pending with SSA at the reconsideration or Administrative Law Judge (ALJ) level; or
    - iii) The application has been approved for temporary SSI benefits.
  - B) The individual must sign an authorization form for repayment of assistance paid while an SSI application is pending.
  - C) If the individual has been denied SSI due to a finding of

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- not disabled (either at the ALJ level or above, or at a lower level if that determination is not appealed) the Department shall adopt that finding and the individual shall not be eligible for State Transitional Assistance.
- D) An individual who has been denied SSI within the previous 12 months due to a finding of not disabled (either at the ALJ level or above, or at a lower level if that determination is not appealed) cannot be determined disabled by the Department unless the individual shows that there has been a substantial change in medical condition or that there has been a substantial change in other factors, such as age or work experience, which now make the individual disabled.
- E) If the individual has been denied SSI due to a finding of not disabled and the client notifies that Department within 10 days after the date of the Department notice of termination that an appeal has been filed, assistance will be continued with no break. If the client notifies that Department within 11 through 65 days after the date of the notice of termination, assistance will be reinstated back to the date of the cancellation. If the client notifies the Department that an appeal has been filed more than 65 days from the date of the notice of termination, assistance will be provided prospectively, unless the client filed the appeal within 65 days of the Department notice, in which case assistance will be reinstated back to the date of the cancellation.
- F) If the ALJ finds the individual not disabled, the Department shall accept the finding as final. The individual is no longer eligible for State Transitional Assistance, unless the individual is eligible under one of the other criteria in this subsection (b). The individual may appeal this determination only through an appeal of the ALJ's decision with the SSA's appeal system.
- G) If an individual is determined eligible for SSI, eligibility for Aid to the Aged, Blind or Disabled will be determined under 89 Ill. Adm. Code 113. The individual is not eligible for General Assistance.
- H) The individual must cooperate with any requirements of the SSI advocacy program. The individual must cooperate by appealing any denial of SSI through the ALJ level.
- 2) 1) Age 55 or over and has not had gross earnings totaling \$2,000 or more in the past year and also has not earned at least \$200 a month in seven of the last twelve months;
- 2) Serious medical or physical or mental problem which prevents the client from working; Referral and payment to medical providers will be made for relevant examinations and reports to make this determination where the client has been unable to secure any documentation or reports or where the Department determines that

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- 4) further--documentation--or--reports--are--necessary--to--make--a determination--Medical transportation will also be provided--if necessary--and requested--by the client;
- 3) Needed at home to care for another person, as determined by a medical provider;
- 4) Does not have a high school diploma or GED, does not have gross earnings totaling \$2,000 or more in the past year, has not earned at least \$200 a month in three of the last twenty-four months, and who cannot read English at the 5-9 grade level; under this last category of not employable, if a client has not attained the required reading level after receiving transitional assistance for twelve months, the client will then be deemed employable unless not employable under a different criteria;
- 5) Suffers from an addictive drug or alcohol abuse problem which prevents the client from working; Documentation of the condition and inability to work must be provided by a medical provider or other substance abuse provider; and the client must be seeking treatment or be referred to and seeking treatment through the Department of Alcoholism and Substance Abuse or a community-based agency providing BASA services;
- 4) 6) Is homeless due to the occurrence within six months of the date of application of a court-ordered evacuation of a building in which he or she lived, domestic violence, fire or natural disaster. Homeless, for this purpose, is defined as residing in a homeless or domestic violence shelter. An individual can be considered not employable for this reason until the client is no longer homeless or until six months have elapsed from the date of application, whichever is earlier;
- 5) 7) Under the age of 20 and in full-time school attendance in high school or the equivalent vocational or other training school;
- 6) 8) Required to take medication to control diabetes, hypertension or seizure disorders; or
- 7) 9) Temporarily ill or incapacitated. The client is only eligible during the period of medically documented illness or incapacity.
- e) If a client claims to be unable to work due to a serious medical physical or mental problem (including alcohol or other substance abuse under subsection (b)(2) or (b)(5) above), a determination of eligibility for interim assistance shall first be made--(See 89-III Adm. Code 113-400 et seq)--the determination of more likely than not eligible for SSI made under the interim assistance program shall constitute the determination of whether a client is not employable; the determination of whether a client is more likely than not eligible for SSI and the determination of whether a client is not employable on the basis of a serious medical, physical or mental problem--the single standard has been developed based on the standard of "chronically needy" found in Section 6-11(c)(2) of the Public Aid Code--(III-Rev. Stat. 1991, ch. 237, par. 6-11(c)(2))--(See 89-III Adm. Code 113-410 for this standard.)

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- d) The client must cooperate in the eligibility process for interim assistance--including but not limited to applying for SSI--and cooperating with any requirements of the SSI advocacy program--in order to be eligible either for interim assistance or transitional assistance;
- e) If the client is determined to be more likely than not eligible for SSI, the client shall be entitled to interim assistance--if the client is determined to be not more likely than not eligible for SSI, this shall constitute a determination that the client is employable;
- f) An interim assistance recipient who is later determined not disabled by the Social Security Administration, and therefore ineligible for SSI, loses eligibility for interim assistance. However, that client shall continue to be considered not employable for purposes of transitional assistance until determined otherwise.

(Source: Emergency amendment at 19 Ill. Reg. 8434, effective June 9, 1995, for a maximum of 150 days)

# Section 114.3 Advocacy Program for Persons Receiving State Transitional Assistance

## EMERGENCY

- a) The Department shall establish advocacy programs to help clients pursue Supplemental Security Income (SSI) applications and, for those found ineligible for SSI initially, to help clients pursue the SSI reconsideration and appeal process. The programs may be limited to specific geographic areas. These programs are not available to persons whose disability is based solely on substance addictions (see Section 114.1(e)).
- b) For those geographic areas of the State where an advocacy program is established, it shall be a condition of eligibility for State Transitional Assistance for the client to participate in and cooperate with the advocacy program.
- c) Responsibilities of SSI advocacy programs include but are not limited to:
- 1) Assisting the client in completing all forms required for the SSI process;
  - 2) Assisting the client in securing and providing all medical information required for the SSI process;
  - 3) Ensuring that the client attends all scheduled SSI appointments, including issuing carfare or arranging for other transportation, when necessary;
  - 4) Contacting the Social Security Administration (SSA) to request rescheduling of a client appointment, when required;
  - 5) Maintaining contact with the SSA regarding the status of the SSI application;
  - 6) Documenting all contacts with the client or SSA;
  - 7) Initiating the SSI appeal and reconsideration process if the SSI



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application is denied, through the Administrative Law Judge level;

8) Referring the case for assistance under the Aid to the Aged, Blind or Disabled (AABD) Program upon approval of the SSI application, and advising the GA office to cancel the GA case;

9) Follow-up after a decision by the Administrative Law Judge, including obtaining a copy of the decision and referring the case for appropriate re-evaluation in the case of a decision by the Administrative Law Judge that the client is not disabled or blind; and

10) Maintaining statistics on case referrals, actions taken and dispositions.

(Source: Emergency rule added at 19 Ill. Reg. 8434<sup>1</sup>, effective June 9, 1995, for a maximum of 150 days)

## Section 114.351 Payment Levels in Group I Counties

## EMERGENCY

a) The following payment levels are established for the GA Program in Group I Counties.

b) The counties included in Group I are:

Boone	Kane	Ogle
Champaign	Kankakee	Whiteside
Cook	Kendall	Winnebago
DeKalb	Lake	Woodford
Dupage	McHenry	

1) Family and Children Assistance Case Payment Levels

SIZE OF ASSISTANCE UNIT	CARETAKER RELATIVE(S) AND CHILD(REN) CURRENT	CHILD(REN) ONLY CURRENT
1	165	102
2	278	201
3	377	249
4	414	319
5	485	379
6	545	407
7	574	438
8	604	469
9	635	503
10	669	538
11	705	576
12	741	614

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13	781
14	822
15	866
16	911
17	959
18	1010

2) The Transitional Assistance case payment level in Group I counties is \$60 \$154.

c) For family sizes greater than 18 or 12, the amount of the payment level shall be determined by adding \$50.00 or \$38.00 respectively for each person above 18 or 12.

d) As the legislature has determined that payments under the GA program should contain amounts for the purpose of energy assistance, and has directed that such amounts be established by rule, the first \$10 of the GA Payment Level, in the City of Chicago and, for Caretaker Relatives and Children, Family size of 1, and the first \$18 of the GA Payment Level for Caretaker Relatives and Children of other family sizes has been designated as being for the purpose of energy assistance.

(Source: Emergency amendment at 19 Ill. Reg. 8434<sup>1</sup>, effective June 9, 1995, for a maximum of 150 days)

## Section 114.352 Payment Levels in Group II Counties

## EMERGENCY

a) The following payment levels are established for the GA Program in Group II Counties.

b) The counties included in Group II are:

Adams	Lee	St. Clair
Bureau	Livingston	Stephenson
Carroll	Logan	Tazewell
Clinton	Macon	Vermilion
Coles	Macoupin	Wabash
DeWitt	Madison	Warren
Douglas	McDonough	Will
Effingham	McLean	
Ford	Mercer	
Fulton	Monroe	
Grundy	Morgan	
Henry	Moultrie	
Iroquois	Peoria	
Jackson	Platt	
JoDaviess	Putnam	
Knox	Rock Island	
LaSalle	Sangamon	

1) Family and Children Assistance Case Payment Levels

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CARETAKER	SIZE OF	AND	CHILD(REN)
RELATIVE(S)	ASSISTANCE	CHILD(REN)	ONLY
	UNIT	CURRENT	CURRENT
	1	160	97
	2	269	194
	3	365	242
	4	403	311
	5	471	369
	6	529	397
	7	557	427
	8	588	459
	9	619	491
	10	651	525
	11	685	561
	12	721	599
	13	760	
	14	799	
	15	841	
	16	886	
	17	934	
	18	982	

2) The Transitional Assistance case payment level in Group II counties is \$60 \$149.

c) For family sizes greater than 18 or 12, the amount of the payment level shall be determined by adding \$48.00 or \$38.00 respectively for each person above 18 or 12.

d) As the legislature has determined that payments under the GA program should contain amounts for the purpose of energy assistance, and has directed that such amounts be established by rule, the first \$5 of the GA Payment Level for Caretaker Relative and Children, Family size of 1, and the first \$18 of the GA Payment Level for Caretaker Relatives and Children of other family sizes has been designated as being for the purpose of energy assistance.

(Source: Emergency amendment at 19 Ill. Reg. 8434<sup>1</sup>, effective June 9, 1995, for a maximum of 150 days)

Section 114.353 Payment Levels in Group III Counties  
EMERGENCY

a) The following payment levels are established for the CA Program in Group III Counties.

b) The counties included in Group III are:

Alexander	Edgar	Jasper	Montgomery	Shelby
Bond	Edwards	Jefferson	Perry	Stark

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Brown	Fayette	Jersey	Pike	Union
Calhoun	Franklin	Johnson	Pope	Washington
Cass	Gallatin	Lawrence	Pulaski	Wayne
Christian	Greene	Marion	Randolph	White
Clark	Hamilton	Marshall	Richland	Williamson
Clay	Hancock	Mason	Saline	
Crawford	Hardin	Massac	Schuyler	
Cumberland		Henderson	Menard	Scott
l) Family and Children	Assistance	Case	Payment	Levels

SIZE OF ASSISTANCE UNIT	1	154	CARETAKER RELATIVE(S)	CHILD(REN) ONLY	CHILD(REN) ONLY
				CURRENT	CURRENT
				94	94

10 940

2) The Transitional Assistance case payment level in Group III countries is \$60 \$144.

c) For family sizes greater than 18 or 12, the amount of the payment level shall be determined by adding \$48.00 or \$36.00 respectively for each person above 18 or 12.

d) As the legislature has determined that payments under the GA program should contain amounts for the purpose of energy assistance, and has directed that such amounts be established by rule, the first \$18 of the CA Payment Level for Caretaker Relatives and Children of all family sizes except the family size of 1 has been designated as being for the purpose of energy assistance.

(Source: Emergency amendment at 19 Ill. Reg. 8434, effective June 9, 1995, for a maximum of 150 days).



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**Section 114.402 Special Needs Authorizations**  
**EMERGENCY**

If the General Assistance unit is determined eligible for an assistance payment, additional payment(s) will be authorized upon request of the client and verification of provision of the service in the following circumstances:

- a) A change in mailing date of the regular warrant creates a period of unmet need.
- b) Correction of an underpayment.
- c) A student who is a junior or senior in high school is included in the assistance unit as an eligible child (applies only to family cases). The allowance is \$15.00 per quarter payable three times a year.
- d) A therapeutic diet allowance is required for an eligible recipient and the diet is prescribed by a physician. The amounts are:

- 1) The amounts are:
  - A) Ulcer (and other chronic conditions requiring a bland low residue diet): \$5.95 per month.
  - B) Diabetic diet (less than 1700 calories): \$7.92 per month.
  - C) Diabetic diet (1700 calories or more): \$17.82 per month.
  - D) High protein, high caloric, high vitamin: \$12.85 per month.
- 2) Approval of an allowance in a different amount or for a non-standard prescribed diet requires approval of the Department. Non-standard diets are approved by the Bureau of Comprehensive Health Services based on the individual needs of the client.

- 1) Children \$17.02-per-month
- 2) Adults, less than 1700 calories \$-7.92-per-month
- 3) Adults, 1700-calories-or more \$17.02-per-month

e) Transportation is required for drug and alcohol treatment/rehabilitation programs. Transportation is not to be paid by the Department if it can be provided without charge by relatives, friends or other agencies or services. A client is expected to use any cost-free mode of transportation available in the community.

e)f) The Department will not use special needs items to determine need in establishing initial or continuing eligibility for GA. Need based on the Payment Level must exist before the consideration of payment for a special need.

(Source: Emergency amendment at 19 Ill. Reg. 8434, effective June 9, 1995, for a maximum of 150 days)

**Section 114.440 Attorney's Fees for VA Appellants**  
**EMERGENCY**

- a) The Department will pay any attorney, or advocate working under the supervision of an attorney, who represents a recipient of cash

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benefits under the General Assistance ~~(SA)~~ program administered by the Department in an appeal of any claim for federal Veterans' benefits before a hearing officer at a Veterans' Administration Regional Office or upon an initial appeal to the Board of Veterans' Appeals, which is decided in favor of the recipient. The amount of the payment will be 25 percent of the maximum federal Supplemental Security Income grant payable to the individual for a period of one ~~1~~ year.

- b) To receive ~~secure~~ payment, the attorney or advocate must submit his or her request for payment to the ~~attorney~~ Department of Public Aid. The request for payment must be postmarked no more than ~~60~~ ~~state~~ ~~160~~ days from the date of the notice of the favorable decision by the Hearing Officer. The following information must be included with the request:

- 1) proof that the attorney or advocate represented the client;
  - 2) a copy of the favorable decision;
  - 3) the attorney's or advocate's bill;
  - 4) the GA recipient's name, address and Public Aid case number; and
  - 5) the attorney's or advocate's Federal Employee Identification number or Social Security number.
- c) The Department will make payment within ~~30~~ ~~thirty~~ ~~300~~ days of receipt of the information listed in subsection (b) above.
- d) The attorney or advocate must agree to waive the right to charge or collect fees and expenses from the General Assistance ~~GA~~ recipient.

(Source: Emergency amendment at 19 Ill. Reg. 8434, effective June 9, 1995, for a maximum of 150 days)

**Section 114.442 Attorney's Fees for SSI Applicants**  
**EMERGENCY**

- a) The Department will pay any attorney, or advocate working under the supervision of an attorney, who represents a recipient of cash benefits under the General Assistance program administered by the Department in an appeal of any claim for Supplemental Security Income (SSI) benefits before an Administrative Law Judge, which is decided in favor of the recipient. The amount of the payment will be 25 percent of the maximum SSI grant payable to the individual for a period of one year. The Department will not pay attorney's fees in cases of concurrent awards where the client is awarded both SSI and Title II (SSA) benefits.

b) To receive payment, the attorney or advocate must submit his or her request for payment to the Department. The request for payment must be postmarked no more than 60 days from the date of the notice of the favorable decision by the Administrative Law Judge. The following information must be included with the request:

- 1) proof that the attorney or advocate represented the client;
- 2) a copy of the favorable decision;
- 3) the attorney's or advocate's bill;

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- 4) the General Assistance recipient's name, address and Public Aid case number; and
- 5) the attorney's or advocate's Federal Employee Identification number or Social Security number.
- c) The Department will make payment within 30 days after receipt of the information listed in subsection (b) above.
- d) The attorney or advocate must agree to waive the right to charge or collect fees and expenses from the General Assistance recipient.

(Source: Emergency rule added at 19 Ill. Reg. 8434, effective June 9, 1995, for a maximum of 150 days)

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- 1) Heading of the Part: Medical Payment
- 2) Code Citation: 89 Ill. Adm. Code 140
- 3) Section Numbers: Emergency Action:  
140.3 Amendment  
140.5 Amendment
- 4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, par. 12-13) [305 ILCS 5/12-13]
- 5) Effective Date of Amendments: June 9, 1995
- 6) If these Emergency Amendments are to expire before the end of the 150-day period, please specify the date on which it is to expire: Not Applicable
- 7) Date Filed in Agency's Principal Office: June 9, 1995
- 8) Reason for Emergency: These emergency amendments are being filed pursuant to the Governor's fiscal year 1996 budget plan and the enactment of the State's budget by the legislature. A reduction in coverage for some medical services is a necessary component of the Department's budget reduction initiatives for fiscal year 1996. Emergency rulemaking is specifically authorized for the implementation of budget reduction initiatives for fiscal year 1996, by Section 10-95 of Public Act 89-21.
- 9) Complete Description of the Subjects and Issues Involved: These emergency amendments are being filed in conjunction with the State's budget plan for fiscal year 1996, by providing for cost containment measures in some areas of the Department's medical assistance programs. The initiatives contained in these amendments are necessary to control costs associated with medical services covered by the Department, and thereby meet restrictions imposed by the new budget plan.  
  
Under these emergency amendments, coverage for medical services will be reduced, effective July 1, 1995. This reduction in medical coverage will affect certain services which are not mandatory under the federal Medicaid Program. Optional Medicaid funded care will be eliminated, for recipients age 21 or over, for dental services, chiropractic services, podiatric services, hospice services, and optical services and supplies. However, coverage will continue for hospice services for Medicare recipients residing in long term care facilities, as mandated by federal law at 42 USC 1396d(o).  
  
Reduced medical coverage will also affect recipients of financial assistance under General Assistance for the State Transitional Program and the State Family and Children Program, by eliminating coverage for dental



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TITLE 89: SOCIAL SERVICES  
CHAPTER I: DEPARTMENT OF PUBLIC AID  
SUBCHAPTER d: MEDICAL PROGRAMS

PART 140  
MEDICAL PAYMENT

SUBPART A: GENERAL PROVISIONS

Section

140.1 Incorporation By Reference  
140.2 Medical Assistance Programs  
140.3 Covered Services Under The Medical Assistance Programs for AFDC, AFDC-WANG, AABD, AABD-WANG, RRP, Individuals Under Age 18 Not Eligible for AFDC, Pregnant Women Who Would Be Eligible if the Child Were Born and Pregnant Women and Children Under Age Eight Who Do Not Qualify as Mandatory Categorically Needy and Disabled Persons Under Age 21 Who May Qualify for Medicaid and In-Home Care (Model Waiver)

EMERGENCY

140.4 Covered Medical Services Under AFDC-WANG for non-pregnant persons who are 18 years of age or older (Repealed)  
140.5 Covered Medical Services Under GA  
140.6 Medical Services Not Covered  
140.7 Medical Assistance Provided to Individuals Under the Age of Eighteen Who Do Not Qualify for AFDC and Children Under Age Eight  
140.8 Medical Assistance For Qualified Severely Impaired Individuals  
140.9 Medical Assistance for a Pregnant Woman Who Would Not Be Categorically Eligible for AFDC/AFDC-WANG if the Child Were Already Born Or Who Do Not Qualify As Mandatory Categorically Needy  
140.10 Medical Assistance Provided to Incarcerated Persons

SUBPART B: MEDICAL PROVIDER PARTICIPATION

Section

140.11 Enrollment Conditions for Medical Providers  
140.12 Participation Requirements for Medical Providers  
140.13 Definitions  
140.14 Denial of Application to Participate in the Medical Assistance Program  
140.15 Recovery of Money  
140.16 Termination or Suspension of a Vendor's Eligibility to Participate in the Medical Assistance Program  
140.17 Suspension of a Vendor's Eligibility to Participate in the Medical Assistance Program  
140.18 Effect of Termination on Individuals Associated with Vendor  
140.19 Application to Participate or for Reinstatement Subsequent to Termination, Suspension or Barring

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services, hospice services, and optical services and supplies.

These cost containment measures are necessary for the implementation of the fiscal year 1996 budget plan, to permit the Department to continue to provide adequate reimbursement levels for essential medical services and to prevent excessive and unnecessary expenditures.

The Department estimates that the reduction in overall spending for medical services, resulting from the proposed elimination of coverage for certain medical services, will be approximately \$34.4 million for fiscal year 1996. The breakdown of this decrease in spending, per medical service, is as follows: dental, \$22.3 million; chiropractic, \$200,000; podiatric, \$600,000; optical, \$1.3 million; and hospice, \$10 million.

10) Are there any Proposed Amendments pending to this Part? Yes

Sections	Proposed Action	Illinois Register Citation
140.27	Amendment	May 5, 1995 (19 Ill. Reg. 6268)
140.80	Amendment	March 17, 1995 (19 Ill. Reg. 3248)
140.80	Amendment	March 24, 1995 (19 Ill. Reg. 4337)
140.82	Amendment	March 17, 1995 (19 Ill. Reg. 3248)
140.82	Amendment	March 24, 1995 (19 Ill. Reg. 4337)
140.84	Amendment	March 17, 1995 (19 Ill. Reg. 3248)
140.84	Amendment	March 24, 1995 (19 Ill. Reg. 4337)
140.642	Amendment	April 14, 1995 (19 Ill. Reg. 5397)

11) Statement of Statewide Policy Objectives: These emergency amendments do not affect units of local government.

12) Information and questions regarding these Emergency Amendments shall be directed to:

Name: Joanne Jones  
Address: Bureau of Rules and Regulations  
Illinois Department of Public Aid  
100 South Grand Avenue East, Third Floor  
Springfield, Illinois 62762  
Telephone: (217) 524-3215

The full text of the Emergency Amendments begins on the next page:

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140.20 Submittal of Claims  
 140.21 Covered Medicaid Services for Qualified Medicare Beneficiaries (QMBs)  
 140.22 Magnetic Tape Billings  
 140.23 Payment of Claims  
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 140.30 Audits  
 140.31 Emergency Services Audits  
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 140.82 Developmentally Disabled Care Provider Fund  
 140.84 Long Term Care Provider Fund  
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 140.95 Hospital Services Trust Fund  
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 140.99 Hospital Services Not Covered (Recodified)  
 140.100 Limitation On Hospital Services (Recodified)  
 140.101 Transplants (Recodified)  
 140.102 Heart Transplants (Recodified)  
 140.103 Liver Transplants (Recodified)  
 140.104 Bone Marrow Transplants (Recodified)  
 140.110 Disproportionate Share Hospital Adjustments (Recodified)  
 140.116 Payment for Inpatient Services for GA (Recodified)  
 140.117 Hospital Outpatient and Clinic Services (Recodified)  
 140.200 Payment for Hospital Services During Fiscal Year 1982 (Recodified)  
 140.201 Payment for Hospital Services After June 30, 1982 (Repealed)

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140.202 Payment for Hospital Services During Fiscal Year 1983 (Recodified)  
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 140.300 Payment for Pre-operative Days and Services Which Can Be Performed in an Outpatient Setting (Recodified)  
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 140.360 Payment Methodology (Recodified)  
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 140.362 Pre July 1, 1989 Services (Recodified)  
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 140.364 Prepayment Review (Recodified)  
 140.365 Base Year Costs (Recodified)  
 140.366 Restructuring Adjustment (Recodified)  
 140.367 Inflation Adjustment (Recodified)  
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 140.369 Groupings (Recodified)  
 140.370 Rate Calculation (Recodified)  
 140.371 Payment (Recodified)  
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 140.373 Utilization (Repealed)  
 140.374 Alternatives (Recodified)  
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 140.376 Utilization, Case-Mix and Discretionary Funds (Repealed)  
 140.390 Subacute Alcoholism and Substance Abuse Services (Recodified)  
 140.391 Definitions (Recodified)  
 140.392 Types of Subacute Alcoholism and Substance Abuse Services (Recodified)  
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 140.398 Hearings (Recodified)

## SUBPART D: PAYMENT FOR NON-INSTITUTIONAL SERVICES

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TABLE L	Services Qualifying for 10% Add-On to Surgical Incentive Add-On (Repealed)
TABLE M	Enhanced Rates for Healthy Moms/Healthy Kids Provider Services

AUTHORITY: Implementing Article III of the Illinois Health Finance Reform Act (Ill. Rev. Stat. 1991, ch. 111 1/2, par. 6503-1 et seq.) [20 ILCS 2215/Art. III] and implementing and authorized by Articles III, IV, V, VI, VII and Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, pars. 3-1 et seq., 4-1 et seq., 5-1 et seq., 6-1 et seq., 7-1 et seq., and 12-13) [305 ILCS 5/Arts. III, IV, V, VI, VII, and 12-13].

SOURCE: Adopted at 3 Ill. Reg. 24, p. 166, effective June 10, 1979; rule repealed and new rule adopted at 6 Ill. Reg. 8374, effective July 6, 1982; emergency amendment at 6 Ill. Reg. 8508, effective July 6, 1982, for a maximum of 150 days; amended at 7 Ill. Reg. 681, effective December 30, 1982; amended at 7 Ill. Reg. 7956, effective July 1, 1983; amended at 7 Ill. Reg. 8308, effective July 1, 1983; amended at 7 Ill. Reg. 8271, effective July 5, 1983; emergency amendment at 7 Ill. Reg. 8354, effective July 5, 1983, for a maximum of 150 days; amended at 7 Ill. Reg. 8540, effective July 15, 1983; amended at 7 Ill. Reg. 9382, effective July 22, 1983; amended at 7 Ill. Reg. 12868, effective September 20, 1983; peremptory amendment at 7 Ill. Reg. 15047, effective October 31, 1983; amended at 7 Ill. Reg. 17358, effective December 21, 1983; amended at 8 Ill. Reg. 254, effective December 21, 1983; emergency amendment at 8 Ill. Reg. 580, effective January 1, 1984, for a maximum of 150 days; recodified at 8 Ill. Reg. 2483; amended at 8 Ill. Reg. 3012, effective February 22, 1984; amended at 8 Ill. Reg. 5262, effective April 9, 1984; amended at 8 Ill. Reg. 6785, effective April 27, 1984; amended at 8 Ill. Reg. 6983, effective May 9, 1984; amended at 8 Ill. Reg. 7258, effective May 16, 1984; emergency amendment at 8 Ill. Reg. 7910, effective May 22, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 7910, effective June 1, 1984; amended at 8 Ill. Reg. 10032, effective June 18, 1984; emergency amendment at 8 Ill. Reg. 10062, effective June 20, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 13343, effective July 17, 1984; amended at 8 Ill. Reg. 13779, effective July 24, 1984; Sections 140.72 and 140.73 recodified to 89 Ill. Adm. Code 141 at 8 Ill. Reg. 16354; amended (by adding sections being codified with no substantive change) at 8 Ill. Reg. 17899; peremptory amendment at 8 Ill. Reg. 18151, effective September 18, 1984; amended at 8 Ill. Reg. 21629, effective October 19, 1984; peremptory amendment at 8 Ill. Reg. 21677, effective October 24, 1984; amended at 8 Ill. Reg. 22097, effective October 24, 1984; peremptory amendment at 8 Ill. Reg. 22155, effective October 29, 1984;

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

amended at 8 Ill. Reg. 23218, effective November 20, 1984; emergency amendment at 8 Ill. Reg. 23721, effective November 21, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 25067, effective December 19, 1984; emergency amendment at 9 Ill. Reg. 407, effective January 1, 1985, for a maximum of 150 days; amended at 9 Ill. Reg. 2697, effective February 22, 1985; amended at 9 Ill. Reg. 6235, effective April 29, 1985; amended at 9 Ill. Reg. 8677, effective May 28, 1985; amended at 9 Ill. Reg. 9564, effective June 5, 1985; amended at 9 Ill. Reg. 10025, effective June 26, 1985; emergency amendment at 9 Ill. Reg. 11403, effective June 27, 1985, for a maximum of 150 days; amended at 9 Ill. Reg. 11357, effective June 28, 1985; amended at 9 Ill. Reg. 12000, effective July 24, 1985; amended at 9 Ill. Reg. 12306, effective August 5, 1985; amended at 9 Ill. Reg. 13998, effective September 3, 1985; amended at 9 Ill. Reg. 14684, effective September 13, 1985; amended at 9 Ill. Reg. 15503, effective October 4, 1985; amended at 9 Ill. Reg. 16312, effective October 11, 1985; amended at 9 Ill. Reg. 19138, effective December 2, 1985; amended at 9 Ill. Reg. 19737, effective December 9, 1985; amended at 10 Ill. Reg. 238, effective December 27, 1985; emergency amendment at 10 Ill. Reg. 798, effective January 1, 1986, for a maximum of 150 days; amended at 10 Ill. Reg. 672, effective January 6, 1986; amended at 10 Ill. Reg. 1206, effective January 13, 1986; amended at 10 Ill. Reg. 3041, effective January 24, 1986; amended at 10 Ill. Reg. 6981, effective April 16, 1986; amended at 10 Ill. Reg. 7825, effective April 30, 1986; amended at 10 Ill. Reg. 8128, effective May 7, 1986; emergency amendment at 10 Ill. Reg. 8912, effective May 13, 1986, for a maximum of 150 days; amended at 10 Ill. Reg. 11440, effective June 20, 1986; amended at 10 Ill. Reg. 14714, effective August 27, 1986; amended at 10 Ill. Reg. 15211, effective September 12, 1986; emergency amendment at 10 Ill. Reg. 16729, effective September 18, 1986, for a maximum of 150 days; amended at 10 Ill. Reg. 18808, effective October 24, 1986; amended at 10 Ill. Reg. 19742, effective November 12, 1986; amended at 10 Ill. Reg. 21784, effective December 15, 1986; amended at 11 Ill. Reg. 698, effective December 19, 1986; amended at 11 Ill. Reg. 1418, effective December 31, 1986; amended at 11 Ill. Reg. 2323, effective January 16, 1987; amended at 11 Ill. Reg. 4002, effective February 25, 1987; Section 140.71 recodified to 89 Ill. Reg. 4002, effective February 25, 1987; amended at 11 Ill. Reg. 4303, effective March 6, 1987; amended at 11 Ill. Reg. 7664, effective April 15, 1987; emergency amendment at 11 Ill. Reg. 9342, effective April 20, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 9169, effective April 28, 1987; amended at 11 Ill. Reg. 10903, effective June 1, 1987; amended at 11 Ill. Reg. 11528, effective June 22, 1987; amended at 11 Ill. Reg. 12011, effective June 30, 1987; amended at 11 Ill. Reg. 12290, effective July 6, 1987; amended at 11 Ill. Reg. 14048, effective August 14, 1987; amended at 11 Ill. Reg. 14771, effective August 25, 1987; amended at 11 Ill. Reg. 16758, effective September 28, 1987; amended at 11 Ill. Reg. 17295, effective September 30, 1987; amended at 11 Ill. Reg. 18696, effective October 27, 1987; amended at 11 Ill. Reg. 20909, effective December 14, 1987; amended at 12 Ill. Reg. 916, effective January 1, 1988; emergency amendment at 12 Ill. Reg. 1960, effective January 1, 1988, for a maximum of 150 days; amended at 12 Ill. Reg. 5427, effective March 15, 1988; amended at 12 Ill. Reg. 6246, effective March 16, 1988; amended at 12 Ill. Reg. 6728, effective March 22,

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

1988; Sections 140.900 thru 140.912 and 140.913, effective August 1, 1988, recodified to 89 Ill. Reg. 147.5 thru 147.205 and 147.206, effective August 1, 1988; Sections 140.940 thru 140.972 recodified to 89 Ill. Reg. 149.5 thru 149.325 at 12 Ill. Reg. 7401; amended at 12 Ill. Reg. 7695, effective April 21, 1988; amended at 12 Ill. Reg. 10497, effective June 3, 1988; amended at 12 Ill. Reg. 10717, effective June 14, 1988; emergency amendment at 12 Ill. Reg. 11868, effective July 1, 1988, for a maximum of 150 days; amended at 12 Ill. Reg. 12509, effective July 15, 1988; amended at 12 Ill. Reg. 14271, effective August 29, 1988; emergency amendment at 12 Ill. Reg. 16921, effective September 28, 1988, for a maximum of 150 days; amended at 12 Ill. Reg. 16738, effective October 5, 1988; amended at 12 Ill. Reg. 17879, effective October 24, 1988; amended at 12 Ill. Reg. 18198, effective November 4, 1988; amended at 12 Ill. Reg. 19396, effective November 6, 1988; amended at 12 Ill. Reg. 19734, effective November 15, 1988; amended at 13 Ill. Reg. 125, effective January 1, 1989; amended at 13 Ill. Reg. 2475, effective February 14, 1989; amended at 13 Ill. Reg. 3069, effective February 28, 1989; amended at 13 Ill. Reg. 3351, effective March 6, 1989; amended at 13 Ill. Reg. 3917, effective March 17, 1989; amended at 13 Ill. Reg. 5115, effective April 3, 1989; amended at 13 Ill. Reg. 5718, effective April 10, 1989; amended at 13 Ill. Reg. 7025, effective April 24, 1989; Sections 140.850 thru 140.896 recodified to 89 Ill. Reg. 146.5 thru 146.225 at 13 Ill. Reg. 7040; amended at 13 Ill. Reg. 7786, effective May 20, 1989; Sections 140.94 thru 140.398 recodified to 89 Ill. Reg. 148.10 thru 148.390 at 13 Ill. Reg. 9572; emergency amendment at 13 Ill. Reg. 10977, effective July 1, 1989, for a maximum of 150 days; amended at 13 Ill. Reg. 11516, effective July 3, 1989; amended at 13 Ill. Reg. 12119, effective July 7, 1989; Section 140.110 recodified to 89 Ill. Reg. 148.120 at 13 Ill. Reg. 12118; amended at 13 Ill. Reg. 12562, effective July 17, 1989; amended at 13 Ill. Reg. 14391, effective August 31, 1989; emergency amendment at 13 Ill. Reg. 15473, effective September 12, 1989, for a maximum of 150 days; amended at 13 Ill. Reg. 16992, effective October 16, 1989; amended at 14 Ill. Reg. 190, effective December 21, 1989; amended at 14 Ill. Reg. 2564, effective February 9, 1990; emergency amendment at 14 Ill. Reg. 3241, effective February 14, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 4543, effective March 12, 1990; emergency amendment at 14 Ill. Reg. 4577, effective March 6, 1990, for a maximum of 150 days; emergency expired August 3, 1990; emergency amendment at 14 Ill. Reg. 5575, effective April 1, 1990, for a maximum of 150 days; emergency expired August 29, 1990; emergency amendment at 14 Ill. Reg. 5865, effective April 3, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 7141, effective April 27, 1990; emergency amendment at 14 Ill. Reg. 7249, effective April 27, 1990; emergency amendment at 14 Ill. Reg. 7249, effective April 27, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 10062, effective June 12, 1990; amended at 14 Ill. Reg. 10409, effective June 19, 1990; emergency amendment at 14 Ill. Reg. 12082, effective July 5, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 13262, effective August 6, 1990; emergency amendment at 14 Ill. Reg. 14184, effective August 16, 1990, for a maximum of 150 days; emergency amendment at 14 Ill. Reg. 14570, effective August 22, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 14826,



## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

maximum of 150 days; amended at 17 Ill. Reg. 18571, effective October 8, 1993; emergency amendment at 17 Ill. Reg. 18611, effective October 1, 1993, for a maximum of 150 days; emergency amendment suspended effective October 12, 1993; amended at 17 Ill. Reg. 20999, effective November 24, 1993; emergency amendment repealed at 17 Ill. Reg. 22583, effective December 20, 1993; amended at 18 Ill. Reg. 3620, effective February 28, 1994; amended at 18 Ill. Reg. 4250, effective March 4, 1994; amended at 18 Ill. Reg. 5951, effective April 1, 1994; emergency amendment at 18 Ill. Reg. 10922, effective July 1, 1994, for a maximum of 150 days; amended at 18 Ill. Reg. 11244, effective July 1, 1994; amended at 18 Ill. Reg. 14126, effective August 29, 1994; amended at 18 Ill. Reg. 16675, effective November 1, 1994; amended at 18 Ill. Reg. 18059, effective December 19, 1994; amended at 19 Ill. Reg. 1082, effective January 20, 1995; amended at 19 Ill. Reg. 2933, effective March 1, 1995; emergency amendment at 19 Ill. Reg. 3529, effective March 1, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 5663, effective April 1, 1995; amended at 19 Ill. Reg. 7919, effective June 5, 1995; emergency amendment at 19 Ill. Reg. 8455, effective June 9, 1995, for a maximum of 150 days.

## SUBPART A: GENERAL PROVISIONS

Section 140.3 Covered Services Under The Medical Assistance Programs for AFDC, AFDC-MANG, AABD, AABD-MANG, RRP, Individuals Under Age 18 Not Eligible for AFDC, pregnant Women Who Would Be Eligible if the Child Were Born and Pregnant Women and Children Under Age Eight Who Do Not Qualify As Mandatory Categorically Needy and Disabled Persons Under Age 21 Who May Qualify for Medicaid and In-Home Care (Model Waiver)

EMERGENCY

a) The following medical services shall be covered (except as limited in subsection (b) below) for recipients of financial assistance under the Department's AABD (Aid to the Aged, Blind or Disabled), AFDC (Aid to Families with Dependent Children), or Refugee/Entrant/Repatriate programs; recipients of medical assistance only under the AABD program (AABD-MANG); and recipients of medical assistance only under the AFDC program (AFDC-MANG); and recipients eligible under the State Transitional Assistance program who are determined by the Department to be disabled:

- 1)a) Inpatient hospital services;
- 2)b) Hospital outpatient and clinic services;
- 3)c) Hospital emergency room visits; \*\*
- 4)d) Encounter rate clinic visits;
- 5)e) Physician services;
- 6)f) Pharmacy services;
- 7)g) Home health agency visits;
- 8)h) Laboratory/x-ray services;
- 9)i) Group care services;
- 10)j) Family planning services and supplies;
- 11)k) Medical supplies, equipment, prostheses and or thoses, and

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

effective August 31, 1990; amended at 14 Ill. Reg. 15366, effective September 12, 1990; amended at 14 Ill. Reg. 15981, effective September 21, 1990; amended at 14 Ill. Reg. 18057, effective October 12, 1990; amended at 14 Ill. Reg. 18508, effective October 30, 1990; amended at 14 Ill. Reg. 20478, effective December 7, 1990; amended at 14 Ill. Reg. 20729, effective December 12, 1990; amended at 15 Ill. Reg. 298, effective December 28, 1990; emergency amendment at 15 Ill. Reg. 592, effective January 1, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 1051, effective January 18, 1991; Section 140.569 withdrawn at 15 Ill. Reg. 1174; amended at 15 Ill. Reg. 6220, effective April 18, 1991; amended at 15 Ill. Reg. 6534, effective April 30, 1991; amended at 15 Ill. Reg. 8264, effective May 23, 1991; amended at 15 Ill. Reg. 8972, effective June 17, 1991; amended at 15 Ill. Reg. 10114, effective June 21, 1991; amended at 15 Ill. Reg. 10468, effective July 1, 1991; amended at 15 Ill. Reg. 11176, effective August 1, 1991; emergency amendment at 15 Ill. Reg. 11515, effective July 25, 1991, for a maximum of 150 days; emergency amendment at 15 Ill. Reg. 12919, effective August 15, 1991, for a maximum of 150 days; emergency expired January 12, 1992; emergency amendment at 15 Ill. Reg. 16355, effective October 22, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 17318, effective November 18, 1991; amended at 15 Ill. Reg. 17733, effective November 22, 1991; emergency amendment at 16 Ill. Reg. 300, effective December 20, 1991, for a maximum of 150 days; amended at 16 Ill. Reg. 174, effective December 24, 1991; amended at 16 Ill. Reg. 1877, effective January 24, 1992; amended at 16 Ill. Reg. 3552, effective February 28, 1992; amended at 16 Ill. Reg. 4006, effective March 6, 1992; amended at 16 Ill. Reg. 6408, effective March 20, 1992; amended at 16 Ill. Reg. 6849, effective April 7, 1992; amended at 16 Ill. Reg. 7017, effective April 17, 1992; amended at 16 Ill. Reg. 10050, effective June 5, 1992; amended at 16 Ill. Reg. 11174, effective June 26, 1992; expedited correction at 16 Ill. Reg. 11348, effective March 20, 1992; emergency amendment at 16 Ill. Reg. 11947, effective July 10, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 12186, effective July 24, 1992; emergency amendment at 16 Ill. Reg. 13337, effective August 14, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 15109, effective September 21, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 15561, effective September 30, 1992; amended at 16 Ill. Reg. 17302, effective November 2, 1992; emergency amendment at 16 Ill. Reg. 18097, effective November 17, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 19146, effective December 1, 1992; amended at 16 Ill. Reg. 19879, effective December 7, 1992; amended at 17 Ill. Reg. 837, effective January 11, 1993; amended at 17 Ill. Reg. 1112, effective January 15, 1993; amended at 17 Ill. Reg. 2290, effective February 15, 1993; amended at 17 Ill. Reg. 2951, effective February 17, 1993; amended at 17 Ill. Reg. 3421, effective February 19, 1993; amended at 17 Ill. Reg. 6196, effective April 5, 1993; amended at 17 Ill. Reg. 6839, effective April 21, 1993; amended at 17 Ill. Reg. 7004, effective May 17, 1993; expedited correction at 17 Ill. Reg. 7078, effective December 1, 1992; emergency amendment at 17 Ill. Reg. 11201, effective July 1, 1993, for a maximum of 150 days; emergency amendment at 17 Ill. Reg. 15162, effective September 2, 1993, for a maximum of 150 days; emergency amendment at 17 Ill. Reg. 18152, effective October 1, 1993, for a

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

respiratory equipment and supplies;

- 12)†† Transportation to secure medical services;
- 13)†† Medichex (EPSDT) services;
- 14)†† Dental services;
- 15)†† Chiropractic services;
- 16)†† Podiatric services;
- 17)†† Optical services/supplies;
- 18)†† Substance alcoholism and substance abuse services pursuant to Sections 140.390 - 140.396; and
- 19)†† Hospice.

b) The following medical services will not be covered when the services are provided on or after July 1, 1995, for recipients age 21 or over:

- 1) Dental services;
- 2) Chiropractic services;
- 3) Podiatric services;
- 4) Optical services/supplies; and
- 5) Hospice services, except for hospice services for Medicare recipients residing in long-term care facilities as mandated by federal law at 42 USC 1396d(o).

\*\*AGENCY NOTE: The visit must be for the alleviation of severe pain or for immediate diagnosis and/or treatment of conditions or injuries which might result in disability or death if there is not immediate treatment.

(Source: Emergency amendment at 19 Ill. Reg. 84 55, effective June 9, 1995, for a maximum of 150 days)

## Section 140.5 Covered Medical Services Under GA

## EMERGENCY

a) The following medical services shall be covered (except as limited in subsection (b) below) for recipients of financial assistance under the Department's GA (General Assistance) program for both the State Transitional Program and the State Family and Children Program unless otherwise indicated.

- 1)†† Inpatient hospital services (State Family and Children Program only);\*
- 2)†† Hospital outpatient and clinic services for surgical procedures, renal dialysis or cancer therapy (State Family and Children Program only);
- 3)†† Hospital emergency room visits (State Family and Children Program only);\*\*
- 4)†† Encounter rate clinic visits;
- 5)†† Physician services;
- 6)†† Vital pharmacy services;\*\*\*
- 7)†† Vital medical supplies, equipment;
- 8)†† Group care services, subject to prior approval;
- 9)†† Family planning services;

## DEPARTMENT OF PUBLIC AID

## NOTICE OF EMERGENCY AMENDMENTS

- 10)†† Laboratory and x-ray;
- 11)†† Transportation to secure medical services;
- 12)†† Dental services (Emergency only: relief of pain and infection, including necessary filling and extractions);
- 13)†† Optical services and supplies if the GA recipient has obtained employment and needs glasses to work;
- 14)†† Prosthesis, orthoses;\*\*\*\*
- 15)†† Home health agency visits;\*\*\*\*\*
- 16)†† Hospice.

b) The following medical services will not be covered when the services are provided on or after July 1, 1995:

- 1) Dental services;
- 2) Optical services and supplies; and
- 3) Hospice.

\*AGENCY NOTE: Physical rehabilitation services and psychiatric services are not covered for GA (age 18 and over).

\*\*AGENCY NOTE: The visit must be for the alleviation of severe pain or for immediate diagnosis and/or treatment of conditions or injuries which might result in disability or death if there is not immediate treatment.

\*\*\*AGENCY NOTE: Those items necessary for life maintenance or to avoid life threatening situations.

\*\*\*\*AGENCY NOTE: Only when essential for employment or expediting hospital discharge.

\*\*\*\*\*AGENCY NOTE: Only on a prior approval basis when the medical condition is documented by the physician as terminal.

(Source: Emergency amendment at 19 Ill. Reg. 84 55, effective June 9, 1995, for a maximum of 150 days)



## DEPARTMENT OF PUBLIC HEALTH

## NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENTS

1) Heading of the Part:

Food Service Sanitation Code

2) Code Citation:

77 Ill. Adm. Code 750

3) Register Citation to Notice of Proposed Rules:

19 Ill. Reg. 533 (January 20, 1995)

4) Date, Time and Location of Public Hearing:

July 6, 1995

10:00 a.m. to 1:00 p.m.

Illinois Department of Public Health

1st Floor Training Room

525 West Jefferson St.

Springfield, Illinois 62761

5) Other Pertinent Information:

The hearing will be held for the sole purpose of gathering public comment on the proposed amendments. Persons interested in presenting testimony at this hearing are advised that the Department/State Board will adhere to the following procedures in the conduct of the hearing:

1. Each person presenting oral testimony shall provide to the hearing officer a written (preferably typed) copy of such testimony at the time the oral testimony is presented. No oral testimony will be accepted without a written copy of the testimony being provided.
2. No person will be recognized to speak for a second time until all persons wishing to testify have done so. All testimony shall conclude at the specific times except that an individual in the midst of presenting testimony shall be allowed to complete his/her testimony.
3. In order to provide for a balanced presentation of views and to facilitate the orderly conduct of the hearing, the Hearing Office may impose such other rules of procedure, including the order of call of witnesses, as he/she deems necessary.

6) Name and Address of Agency Contact Person:

Questions regarding these proposed amendments or the public hearing shall be directed to: Gail M. DeVito, Administrative Rules Coordinator, Illinois

## DEPARTMENT OF PUBLIC HEALTH

## NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENTS

Department of Public Health, 535 West Jefferson, Fifth Floor, Springfield, Illinois 62761

## DEPARTMENT OF PUBLIC HEALTH

## NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENTS

1) Heading of the Part:

Retail Food Store Sanitation Code

2) Code Citation:

77 Ill. Adm. Code 760

3) Register Citation to Notice of Proposed Rules:

19 Ill. Reg. 551 (January 20, 1995)

4) Date, Time and Location of Public Hearing:

July 6, 1995

10:00 a.m. to 1:00 p.m.

Illinois Department of Public Health

1st Floor Training Room, 525 West Jefferson St.

Springfield, Illinois 62761

5) Other Pertinent Information:

The hearing will be held for the sole purpose of gathering public comment on the proposed amendments. Persons interested in presenting testimony at this hearing are advised that the Department/State Board will adhere to the following procedures in the conduct of the hearing:

1. Each person presenting oral testimony shall provide to the hearing officer a written (preferably typed) copy of such testimony at the time the oral testimony is presented. No oral testimony will be accepted without a written copy of the testimony being provided.
2. No person will be recognized to speak for a second time until all persons wishing to testify have done so. All testimony shall conclude at the specific times except that an individual in the midst of presenting testimony shall be allowed to complete his/her testimony.
3. In order to provide for a balanced presentation of views and to facilitate the orderly conduct of the hearing, the Hearing Office may impose such other rules of procedure, including the order of call of witnesses, as he/she deems necessary.

6) Name and Address of Agency Contact Person:

Questions regarding these proposed amendments or the public hearing shall be directed to Gail M. DeVito, Administrative Rules Coordinator, Illinois Department of Public Health, 535 West

## DEPARTMENT OF PUBLIC HEALTH

## NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENTS

Jefferson, Fifth Floor, Springfield, Illinois 62761



## DEPARTMENT OF PUBLIC HEALTH

## NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENTS

## ILLINOIS REGISTER

## COMMISSIONER OF BANKS AND TRUST COMPANIES

## NOTICE OF PUBLIC INFORMATION

## NOTICE OF ACCEPTANCE OF AN APPLICATION

HEARTLAND FINANCIAL USA, INC., DUBUQUE, IOWA

TO ACQUIRE LASALLE BANK DUPAGE, OAK BROOK ILLINOIS

Pursuant to Section 3.071(d) of the Illinois Bank Holding Company Act of 1957, 205 ILCS 10/3.071(d) (1992), notice is hereby given that the Commissioner of Banks and Trust Companies has accepted for processing an application by Heartland Financial USA, Inc., 1398 Central Avenue, Dubuque, Iowa, to acquire LaSalle Bank Dupage, 2221 Camden Court, Oak Brook, Illinois 60521.

Interested persons who desire to comment on this proposed acquisition may submit their comments in writing no later than 14 days after the publication of this notice to:

Dina A. Mansour  
Commissioner of Banks and Trust Companies  
310 South Michigan Ave.  
Suite 2130  
Chicago, Illinois 60604

JOINT COMMITTEE ON ADMINISTRATIVE RULES  
ILLINOIS GENERAL ASSEMBLY

## SECOND NOTICES RECEIVED

The following second notices were received by the Joint Committee on Administrative Rules during the period of June 6, 1995 through June 12, 1995, and have been scheduled for review by the Committee at its June 20, 1995 meeting. Other items not contained in this published list may also be considered. Members of the public wishing to express their views with respect to a rule should submit written comments to the Committee at the following address: Joint Committee on Administrative Rules, 700 Stratton Bldg., Springfield, IL 62706.

Second Notice Expires	Agency and Rule	Start of First Notice	JCAR Meeting
7/20/95	Secretary of State, School Bus Driver Permit (92 Ill Adm Code 1035)	4/21/95 19 Ill Reg 5992	6/20/95
7/20/95	Secretary of State, Issuance of Licenses (92 Ill Adm Code 1030)	4/21/95 19 Ill Reg 5957	6/20/95
7/20/95	Secretary of State, Public Library Construction Grants (23 Ill Adm Code 3060)	4/21/95 19 Ill Reg 5982	6/20/95
7/20/95	Department of Children and Family Services, Foster Care Placement Goal (89 Ill Adm Code 301)	3/24/95 19 Ill Reg 3633	6/20/95
7/20/95	Department of Children and Family Services, Repeal of Relative Home Placement (89 Ill Adm Code 335)	3/24/95 19 Ill Reg 3666	6/20/95
7/20/95	Department of Children and Family Services, Authorized Child Care Payments (89 Ill Adm Code 359)	3/24/95 19 Ill Reg 3610	6/20/95
7/20/95	Department of Children and Family Services, Background Check of Foster Family Home Applicants (89 Ill Adm Code 380)	3/24/95 19 Ill Reg 3616	6/20/95
7/21/95	Department of Conservation, General Hunting and Trapping on Department-Owned or -Managed Sites (17 Ill Adm Code 510)	4/21/95 19 Ill Reg 5915	6/20/95

JOINT COMMITTEE ON ADMINISTRATIVE RULES  
ILLINOIS GENERAL ASSEMBLY

## SECOND NOTICES RECEIVED

7/21/95	Department of Conservation, Crow, Woodcock, Snipe, Rail and Teal Hunting (17 Ill Adm Code 740)	4/21/95 19 Ill Reg 5905	6/20/95
7/22/95	Department of Mines and Minerals, The Illinois Oil and Gas Act (62 Ill Adm Code 240)	2/24/95 19 Ill Reg 2215	6/20/95



**ILLINOIS REGISTER**  
**ADMINISTRATIVE CODE ORDER FORM**

**PLEASE USE THIS FORM FOR ALL ORDERS OR TO NOTIFY US OF CHANGE OF ADDRESS  
ALL ORDERS ARE PAYABLE IN ADVANCE OR BY VISA OR MASTER CHARGE  
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**MICROFICHE SETS OF THE ILLINOIS REGISTER @\$200.00 PER SET**

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**CUMULATIVE INDICES TO THE ILLINOIS REGISTER @\$1.00 each:**

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(Volume Number)      (Issue Number)      (Issue Date)

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NEW RENEWAL

**ANNUAL SUBSCRIPTION AND SUPPLEMENT TO THE ILLINOIS ADMINISTRATIVE CODE; PUBLISHED  
QUARTERLY @\$290.00**

(1994 Code & 2 Supplements)	(Quantity)	(1995 Supplements)	(Quantity)
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**TOTAL AMOUNT OF ORDER: \$**

**\_\_\_Check \_\_\_Visa \_\_\_Discover    Card Number: \_\_\_\_\_**

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(STATE)

(ZIP CODE)

(TELEPHONE NUMBER)

**GEORGE H. RYAN**  
**SECRETARY OF STATE**

**Address:**

**Index Department  
111 E. Monroe  
Springfield, IL 62756**

